

A WORLD OF CULTURES
www.aworldofcultures.org
volunteer@aworldofcultures.org
2025 VOLUNTEER APPLICATION

Submission of this application indicates your acceptance of any and all conditions.

PLEASE PRINT

First Name: _____ Last Name: _____

Company/Business/Organization Name:

Street Address: _____

City: _____ State: _____ Zip: _____

Day Phone: ____ (____) _____ Cell Phone: (____) _____

Fax: _____ Other: _____

Website: _____

E-mail: _____

Are you over the age of 18 years old _____

What is your availability for Saturday, November 8, 2025?

Please indicate two (2) areas of talent:

1) _____

2) _____

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Have you ever been convicted of, plead no contest to, or plead guilty to a felony or misdemeanor in the past 10 years? Yes ____ No ____

If answered yes to the above question, please briefly explain:

Share any special skills, talents or abilities that you have:

Provide the name and telephone number, with area code, of two (2) people that have known you for at least 5 years.

1) _____

2) _____

Please share any situation that may prohibit the type of volunteer service you can do?

Are you available to help with street team promotions between October 11 and November 1, 2025? _____

Do you own or have access to a car that has current registration and insurance? _____

Signing your full legal name below and submitting this application indicates that the information you have provided is true and complete.

Signature: _____ Date: _____

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