

Volunteer Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
E-Mail Address	

Availability

Which week are you available for volunteer assignments?

___ Week of June 18th thru June 22nd **and/or** ___ Week of June 25th thru June 29th
Hours are 8:00 a.m. until 2:00 p.m.

Interests

Tell us in which areas you are interested in volunteering

___ Administration ___
___ Events ___
___ Field work ___
___ Fundraising ___
___ Deliveries ___

Professional Skills and Qualifications and Volunteer Experience

Tell us about you



**Madison County Juneteenth Organization
1101 7th Street, Madisonville, Texas 77864**

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

References

Name	
Street Address	
City ST ZIP Code	
Phone	

Name	
Street Address	
City ST ZIP Code	
Phone	

Name	
Street Address	
City ST ZIP Code	
Phone	

Agreement and Signature

Name (printed)	
Signature	
Date	

By submitting this application, I understand that a background check for Criminal History and History of Abuse or Neglect will take place. I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

