

## The Buena Vista Chamber of Commerce Volunteer Application

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**Please print**

First Name.....Last Name.....

Address .....City/State/Zip.....

Telephone .....Date of Birth .....

**Physical Limitations:**    No    Yes (Please Explain)

**Education (highest level completed)**

Grades 1-5    6-9    11-12    College    Business    Graduate School    Technical/Vocational

**Former work/occupation** .....

**Most recent employer (optional)** .....

**List previous volunteer experience**.....

**Skills (List your skills and indicate proficiency level)**    Skilled    Can Teach    Amateur

1. ....

2. ....

3. ....

**Do you have proficient computer skills?** (Please circle one)

Yes    No

**Are you comfortable using a telephone & making and answering phone calls?** (Please circle one)

Yes    No

**Are you comfortable answering questions in the Visitor Center?** (Please circle one)

Yes    No

**Volunteer availability: (Circle all applicable)**

Number of Days per week: 1 2 3 4 5

Monday    Tuesday    Wednesday    Thursday    Friday    No Preference

**Transportation: (How you will get to your assignment)**

Public Trans.    Walk    Bus/Van Taxi/Car Svc    Car

**In an emergency, notify:**

First Name.....Last Name.....

Address .....

City/State/Zip.....Telephone .....

Volunteers hereby agree to serve any client who is assigned regardless of race, sex, creed or national origin.

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(Signature/Volunteer)    (Signature/Staff)    (Date)