

## APPLICATION FOR BARSTOW PAL VOLUNTEER SERVICE

NAME:		Phone:			
ADDRESS:					
City:	State:	Zip			
AGE: 16-20 21-40 41-60	61-80				
Barstow PAL Event:					
Have you had previous volunteer experience? If so, where, and list type of volunteer work you were doing:					
Please list any professional licenses or registration that you have had or presently possess:					
List membership in Clubs, Societies or Organizations:					
Reasons for seeking volunteer work with	the Police Activ	ities League:			



## **VOLUNTEER INFORMATION SHEET**

Special Skills	:					
Soccer	_ Baseball Girls Cheerleading C _Track-n-Field	adetsBo	xingJudo	_		
Special Inter	ests or Hobbies:					
How many h		to give regula				
How many hours will you be able to give regularly?						
Monday	A.M P.M	Thursday	A.M P.M			
-	A.M P.M					
Wednesday	A.M P.M		A.M P.M			
		Sunday	A.M P.M			
Whom to call in case of emergency?						
Address:	Phone:					
Signature:						
Date of Application						
INTERVIEWI	ED BY		Т	itle		