



## Department of Recreation, Parks & Open Space Volunteer Application Form

*Please complete and submit to Shirley Tyree, 501 Boush St., Norfolk, VA 23510,  
or by fax at (757) 441-5423. Questions? Call (757) 441-2400 ext 227.*

### PLEASE PRINT

### STAFF USE

Name: \_\_\_\_\_

Dept/Site: \_\_\_\_\_

Address: \_\_\_\_\_

Job ID: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Apply/Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SSN: \_\_\_\_\_

Interview Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Orientation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Hobbies/Activities: \_\_\_\_\_

Skills/Abilities: \_\_\_\_\_

In Case of Emergency: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

By my signature below, I am registering as a volunteer with the Department of Recreation, Parks & Open Space. I hereby release the City of Norfolk, its employees, agents, officers, and officials for any and all injuries or property damage which may arise out of my volunteering.

Volunteer: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Site Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Volunteer Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

### What time are you available? Please circle all that apply.

Month:      Jan    Feb    Mar    Apr    May    Jun    Jul    Aug    Sep    Oct    Nov    Dec

Week:      1      2      3      4      5

### Please check all times that you will be available for assignments.

Times	7	8	9	10	11	12	1	2	3	4	5	6	7
Monday													
Tuesday													
Wednesday													
Thursday													
Friday													
Saturday													
Sunday													

**Disclaimer:** Prior to volunteering in the Department of Recreation, Parks & Open Space, an individual must submit to a criminal background and sexual offender check. The background check is \$25 per person, the cost of which must be incurred by the individual.