

VOLUNTEER APPLICATION FORM



BOYS & GIRLS CLUB
OF INDIAN RIVER COUNTY

Boys & Girls Club of Indian River County, Inc.
1729 17th Avenue
Vero Beach, FL 32960

Phone: (772) 299-7449 FAX (772) 299-3840

****PLEASE FILL IN ALL AREAS COMPLETELY, INCLUDING FULL MIDDLE NAME, TO ENSURE COMPLETE AND ACCURATE BACKGROUND CHECKS.****

Location: Vero Sebastian Fellsmere

Date: _____

Last Name: _____ First: _____ Middle: _____

Street Address: _____

City: _____ Zip: _____

Phone/Home: _____ Office: _____

Employer: _____

Date of Birth: _____ Sex: M____ F____

Social Security Number: _____

Please circle the day(s) you are interested in volunteering: Mon. Tue. Wed. Thu. Fri.

Please indicate the age group(s) in which you are interested: ___ 6 to 8 ___ 9 to 11 ___ 12 & older ___ no preference

List Previous/Current Volunteer Experience: _____

List any Special Skills/Hobbies/Interests that you have which would assist us in determining your volunteer position: _____

