

Lynchburg Parks and Recreation Volunteer Application

Thank you for your interest in volunteering for Lynchburg Parks and Recreation! Please complete the following information and return in person, via email to tamara.reynolds@lynchburgva.gov; Fax to 434-528-2729 or mail to Lynchburg Parks and Recreation, 301 Grove St., Lynchburg, VA 24501.

(PLEASE PRINT)			
Today's Date			
First Name Last Name			
Street Address			
City State Zip			
Primary Phone Number			
Secondary Phone Number			
Email			
Age Range ☐ Under 13 ☐ 14 – 18 ☐ 19 – 30 ☐ 30 – 50 ☐ Over 50			
During which hours are you available for volunteer assignments? ☐ Weekday Mornings ☐ Weekday Afternoons			
□ Weekday Evenings □ Weekend Mornings			
□ Weekend Afternoons □ Weekend Evenings			
How many hours per week and/or per month can you volunteer?			
Week Month			
What type of volunteering are you interested in? One-Time Volunteer On-Going Volunteer			
 Internship (High School) Internship (College) Other (Please List) 			
Are you volunteering to satisfy an education requirement? C Yes C No			
Are you volunteering for court-ordered community service? C Yes C No			



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Indicate which areas you are interested in volunteering.		
	Administration (filing, scanning documents, etc.)	
	Adopt-A-Trail	
	Community Centers - Tutor and/or Recreation Assistant	
	Educational Speaker/Class Instructor	
	Gardening, Parks, and Trails Maintenance	
	Nature Zone and/or Animal Feeder	
	Photographer	
	Special Events	
	Youth Basketball and Girls Softball Coaches	
	Other (please list):	
Have you ever had a felony conviction? Yes No Highest level of education completed: Work experience (please summarize):		
Physical limitations if any:		
Special skills or qualifications:		



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Previous volunteer experience:
Please share with us why you are interested in volunteering for the City of Lynchburg:
Please provide two references (name, phone and/or email and relationship): 1.
2.
Person to contact in case of an emergency:
First Name Last Name
Primary Phone Number
Secondary Phone Number
By submitting this application, 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. It is als
understood that depending on the type of volunteer service I am selected for, a background check
may be performed.
Applicant Signature
Parent/Guardian Signature (if under 18 years of age)