



1st contact _____
Phone/email/in person _____
Circle one
Date _____

1201 Pawlings Road, Audubon, PA 19403 Phone 610-666-5593 Ext. 101 Fax: 610-630-2209
jjacvoluteer@audubon.org

Volunteer Application

Date: _____

Name: _____

Home Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Emergency Phone: _____

E-Mail Address: _____

Day(s) and Time(s) Available: _____

Time Preferred: Mornings Afternoons Evenings Anytime As Needed

Describe any previous volunteer experience you have had: (Please include where, when, specific duties)

Do you have any special skills or hobbies that may be useful in your work as a volunteer?

After receiving your completed application, you will be contacted to schedule an orientation session at which time you will hear more details about our volunteer opportunities and needs. At that time you will be asked to fill out an interest survey so that we can best match a need to your skills and interests.

If you are age 17 or below, you must print this form and send it to Mill Grove with a parent or guardian's signature. If you are age 13 or below, you may only volunteer when accompanied by a parent or guardian.

Signature of parent of guardian: _____

Please fill out the form and either send back as an attachment via e-mail to panderson@audubon.org or print off and either fax or mail to: John James Audubon Center at Mill Grove, 1201 Pawlings Rd, Audubon, PA 19403. Fax: 610-630-2209 Attn: Tricia Anderson

If sending via e-mail, please save the file as "(your last name) Volunteer".