



Armory Park Center  
220 South 5<sup>th</sup> Avenue\* Tucson, Arizona 85701  
Tel. 520-791-4865 Fax 520-791-5314  
<http://tucsonaz.gov/parksandrec/armory>

## VOLUNTEER ENROLLMENT FORM

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

E-mailAddress \_\_\_\_\_

Do you have your own transportation? Yes No

Please tell us why you want to volunteer at Armory Park Center:

What type of work would you like to do?

\_\_\_ Home Delivered Meals      \_\_\_ Maintenance      \_\_\_ Teach a Class

\_\_\_ Clerical Office      \_\_\_ Friendly Visiting      \_\_\_ Telephoning

\_\_\_ Hospitality/Greeter      \_\_\_ Senior Center Kitchen      \_\_\_ Cook

\_\_\_ Gardening      \_\_\_ Gift Shop Clerk      \_\_\_ Newsletter

\_\_\_ Armory Club #1 Board      Other: Please tell us how you would like to contribute:

Please check the days and times you can volunteer:

Monday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

Tuesday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

Wednesday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

Thursday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

Friday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

Saturday: 9 am - noon    noon - 4 pm    4 pm - 7:30pm    other \_\_\_\_\_

When can you start? \_\_\_\_\_

Do you hold a certification: \_\_\_\_\_ Expires: \_\_\_\_\_

Do you have medical insurance coverage? Yes      No

If yes, name of Insurance Company \_\_\_\_\_

Group Number \_\_\_\_\_

If you use your personal car in volunteer service, auto insurance must be kept in effect as required by law.

Driver's License Number \_\_\_\_\_

Auto Insurance Company \_\_\_\_\_

Agent's Name & Phone Number \_\_\_\_\_

\_\_\_\_\_

Emergency Contact Information:

1) Contact Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship \_\_\_\_\_

2) Contact Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship \_\_\_\_\_