



## Volunteer Interest Form

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

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

Phone Number: \_\_\_\_\_ Cell Phone Number (if different): \_\_\_\_\_

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

Birthdate (mm/dd/yyyy): \_\_\_\_\_

Would you like to be added to our Volunteer and General E-Newsletters?  Yes  No

### Emergency Contact

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

Phone Number/s: \_\_\_\_\_

Please list any medical conditions that you would like us to be aware of (optional):

### Volunteer Interests

*Most of our volunteer opportunities are currently with Horticulture. However, we are building our program and would love to know your areas of interest.*

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Horticulture/Gardening | <input type="checkbox"/> Mailings/Office | <input type="checkbox"/> Development/Fundraising  |
| <input type="checkbox"/> Public Programs        | <input type="checkbox"/> Maintenance     | <input type="checkbox"/> Photography/Social Media |
| <input type="checkbox"/> Public Art             | <input type="checkbox"/> Other: _____    |   |

Please describe any special skills you have that may be relevant:

When are you generally available?: \_\_\_\_\_

Have you volunteered with the Conservancy in the past?  Yes  No

If so, in what capacity? \_\_\_\_\_

Why do you want to volunteer with the Rose Kennedy Greenway Conservancy?