



# Volunteer Intake Form

Disclaimer: Thank you for your interest in volunteering for The Town of Indian Lake & ADK Action. This form is used to collect information about new volunteers and used for internal purposes only. The information you provide is confidential and will be treated accordingly.

## VOLUNTEER INFORMATION

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Spoken Language(s):  English  Other: \_\_\_\_\_

Current or Past Volunteer Experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

