Los Angeles Maritime Institute

VOLUNTEER INFORMATION FORM
(please print legibly)

Personal Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Circle type: (Hm) (Wk) (Mobile)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>City</td>
<td>State</td>
<td>Zip</td>
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</tbody>
</table>

Email

Second Email and/or Phone Number (please specify type)

Date you attended orientation (if different than above):

How did you hear about LAMI?

Special Skills and Interests (please check all that apply)

<table>
<thead>
<tr>
<th>Sailing with Youth</th>
<th>Diesel Mechanic</th>
<th>Office Projects</th>
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<tbody>
<tr>
<td>Training Programs</td>
<td>Electrical</td>
<td>Web Design</td>
</tr>
<tr>
<td>Maintenance</td>
<td>Plumbing</td>
<td>Food Preparation</td>
</tr>
<tr>
<td>Canvas/Sail Repair</td>
<td>Fundraising</td>
<td>Retail</td>
</tr>
<tr>
<td>Carpentry</td>
<td>Grant Writing</td>
<td>Other</td>
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</tbody>
</table>

If “Other,” please explain:

Occupation (current and/or previous):

U.S. Coast Guard License or certification(s):

Other pertinent license(s) and/or certification(s) (eg. CPR/1st Aid):

Any limitations?

Availability (please check all that apply)

<table>
<thead>
<tr>
<th>Week days</th>
<th>Weekends</th>
<th>Over-nights</th>
<th>Multi-day Voyages</th>
</tr>
</thead>
</table>
**Emergency Contact Information**

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
<th>Phone (s)</th>
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Social Security # (optional) | Driver’s License # (optional) | Birthday |
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Additional Information (medical concerns such as allergies, special health concerns, medications, etc.):

________________________________________________________________________

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**References**

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<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Email or other address</th>
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How will your presence in our organization benefit the LAMI community? For example, are you a good leader? Do you love to teach/educate? Do you work well with and/or inspire others? Describe aspects of your character that will make you an asset to our program, or a goal you hope to achieve by participating.

________________________________________________________________________

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________________________________________________________________________

Signature                                           Date