



VOLUNTEER INFORMATION FORM

(please print legibly)

Personal Information

Form with fields for Name, Phone, Date, Address, City, State, Zip, Email, and Second Email and/or Phone Number.

Date you attended orientation (if different than above):

How did you hear about LAMI?

Special Skills and Interests (please check all that apply)

Table with 5 columns and 5 rows listing skills and interests such as Sailing with Youth, Diesel Mechanic, Office Projects, etc.

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)

Form with checkboxes for Week days, Weekends, Over-nights, and Multi-day Voyages.

Emergency Contact Information

Name	Relationship	Phone (s)
Social Security # (optional)	Driver's License # (optional)	Birthday

Additional Information (medical concerns such as allergies, special health concerns, medications, etc.):

References

Name	Phone	Email or other address

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.

Signature

Date