

Volunteer Form

Please Print or Type

Volunteer's Name:

Last

First

Middle

Prefer to be called

Email:

Phone:

Classification/Last Grade Completed: _____ Gender: ___ Male ___ Female

Major/Favorite subject(s):

Volunteer Dates:

Sun	Mon	Tue	Wed	Thur	Fri

Fall 2008:

Spring 2008:

Emergency Contact Person:

Last

First

Middle

Mailing Address: _____
Street City State

(Area Code) Home Phone Number

(Area Code) Cell Phone Number

(Area Code) Work Phone Number

Email Address

I agree to uphold the integrity of the Jr. Seahawk Academy and UNCW and follow all policies of the Academy and UNCW. All information stated is accurate.

Signature: _____

Volunteers must be approved by Junior Seahawk staff and volunteers over the age of 18 will have to provide a current background check.