
TOWN OF YARMOUTH
YARMOUTH PARKS, RECREATION & COMMUNITY SERVICES

Application for Volunteer & Community Service Hours

Name: _____ Date: _____

Address: _____

E-mail: _____

Phone: (H) _____ (Cell) _____

Type of Volunteer / Community Service Hours sought: _____

Reason for seeking hours: _____

Please list two references for us to contact. Name, Current School/Employer, & Phone #:

Please feel free to write additional information, best meeting or availability schedule, or special accommodations needed.

All the information and materials I have provided to the Town of Yarmouth as part of the volunteer / community service hours process are accurate and truthful. I understand that by providing the municipality with false information or intentionally withholding relevant information regarding my application may be grounds for dismissal. I also understand the Town of Yarmouth is not required to grant all volunteer/community service hours requested and may terminate volunteers at any time.

Volunteer/Community Service Applicant Signature: _____