



1250 Market Street, Suite 1006
Chattanooga, TN 37402
(423) 643-6888
(423) 643- 6885 (fax)

VOLUNTEER QUESTIONNAIRE

First Name: _____ **Last Name** _____

Address: _____

City: _____ **County:** _____ **State:** _____ **Zip code:** _____

Email address: _____ **Cell Phone:** _____

Phone: Home _____ **Work** _____

Employer: _____

Employer Address: _____

May we contact you at work? Yes No If yes, when? _____

Work Week hours available to volunteer: _____

Weekend hours available to volunteer: _____

In a few words, describe yourself and what your interest is for volunteering.

Do you prefer to work individually or in a group? What jobs/tasks do you like most? Least?

Do you have leadership experience? Please describe.

What positions(s) are you interested in? (please rank in the **order** of importance; 1 being the **highest**.)

_____ **Office Support**

Volunteers need to be familiar with Microsoft Office products and possess general office skills.

_____ **Communications**

Volunteers work on special projects such as the newsletter, public relations, press releases.

_____ **Event Volunteers**

Volunteers work with Outdoor Chattanooga staff and other outdoor organizations helping plan, set-up, and work outdoor events.

What skills would you bring to Outdoor Chattanooga? (please check the appropriate boxes)

- | | |
|--|---|
| <input type="checkbox"/> Planning | <input type="checkbox"/> communications-oral |
| <input type="checkbox"/> Project management | <input type="checkbox"/> communications-written |
| <input type="checkbox"/> Event management | <input type="checkbox"/> artist |
| <input type="checkbox"/> Fund raising | <input type="checkbox"/> graphic design |
| <input type="checkbox"/> Public relations | <input type="checkbox"/> computer-hardware |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> computer-software |
| <input type="checkbox"/> Office administration | <input type="checkbox"/> computer-database |
| <input type="checkbox"/> Medical | <input type="checkbox"/> photography/video production |
| <input type="checkbox"/> Marketing/sales | <input type="checkbox"/> Other _____ |

Comments/additional details: _____

I am qualified and/or licensed to teach the following activities: _____

What is your favorite outdoor activity? _____

What activities do you participate in? _____

References

Name	Address	Phone

By signing this form I agree that OutdoorChattanooga has permission to share my personal information with selected outdoor groups that would benefit from my volunteer participation.

Signature

Date