



VOLUNTEER APPLICATION FORM

I.	NameAddress (City, State, Zip)PhoneEmail	
	Emergency Contact	
II.	How did you hear about AquAbility?	
	Previous volunteer experience?	
	Water experience (personal, teaching, etc.)	
	Experience with people with disabilities	
III.	Have you ever been convicted for violation of any laws, traffic or otherwise? YES NO If YES, please explain: Do you have any physical condition that may limit your activities? YES NO If YES, please explain:	
IV. or ne		we may contact, who are NOT family members a teacher, employer, religious or spiritual leader,
•	ther relationship.	, a coacher, employer, rengious or spiritual reader,
1.	•	Phone
		Relationship
2.	Name	Phone
		Relationship
3.		Phone
	Email	Phone
	reby give my consent to contaconduct a background check.	ct my references, past and present employers, and
 Signature		 Date