

Greater Comfort Area Chamber of Commerce

20 Hwy 87 Comfort Texas 78013

Chamber Phone: 830-995-4501

VOLUNTEER APPLICATION

BACKGROUND: In planning for our Chamber activities, we need to know about you and how to contact you. If you need more space to write, use the back side of this form. We thank you so much for being willing to share your skills and interests with us.

Your Name, printed: _____

Postal address: _____

Your home phone: _____ Work phone: _____ Cell phone: _____

Email address: _____

Other means of contact: _____

PROFESSIONAL CERTIFICATIONS OR CREDENTIALS of any kind: _____

PREVIOUS VOLUNTEER EXPERIENCE: _____

SPECIAL SKILLS: _____

INTERESTS: Administrative, Events, Fundraising, Web, Visitor Center
Greeter/Assistant, Other _____

AVAILABILITY: Weekdays, Weekends, Evenings,

LIMITATIONS: Do you have any physical limitations or special needs that may affect what you can do or can participate in?

EMERGENCY CONTACT: _____

Our policy is to provide equal opportunities without regard to race, religion, national origin, gender, sexual preference, age or disability. Thank you for completing this application and for your interest in volunteering with us.

YOUR SIGNATURE: _____

Date submitted: ____/____/____