

Name:	
Date Joined:	

Volunteer Application

Basic Contact Information			
First Name:	Last Name:	DOB:	
		/	
Phone:	Email:	Sex:	
		Male or Female	
Address:			
City:	State:	Zip Code:	

Vehicle/Parking Information			
Make:	Model:	Color:	
License #:	Type: SUV I	Pickup Car	
Special Tag Info (Out of Sta	Handicap ADA Card #:		
Club Parkinson's Disabled Parking Policy			
A photocopy of your Disabled Identification Card is required to receive a ePermit.			
(\$50/year for additional vehicles may be assessed.)			
Are you a current of the second se	o YES		
University?	• NO		
If you answered yes:	• YES		
Do you have an active Parking ePermit with WSU?		• NO	

Emergency Contact			
Name:	Phone:	Relationship:	
Address:	City/State:	Zip:	



Occupation/Volunteer Experience/Prior Experiences		
Current/Prior Occupation(s):		
How did you hear about Club Parkinson's?		
Why are you interested in volunteering for Club Parkinson's?		
Previous volunteer experience(s)?		

Additional Questions			
 What is your T-Shirt Size? What is your Hoodie Size? 	Small Medium Large X-Large 2XL 3XL Small Medium Large X-Large 2XL 3XL		
Club Parkinson's Di	rectory & Photo		
We distribute a quarterly directory containing names, phone numbers, addresses, and individual photos to all members, facilitating communication and fostering familiarity among our community!			
• Are you okay with Club Parkinson's sharing the following for our Quarterly Member Directory?	oNameoPhoneoAddressoPicture		
Club Parkinson's Priva	te Facebook Group		
We've established a private Facebook Group exclusivel	y for Club Members, Volunteers, Staff, and Board of		
Directors to disseminate information, exchange photos, share stories, and provide updates tailored			
specifically to our community.			
a Ara you an Eacabaak2	o YES		
 Are you on Facebook? 	• NO		
 Would you like an invite to our Private Facebook 	o YES		
Group?	• NO		

	Volunteer Events (Would you be interested in helping with any of the following?)			
0	Fundraisers	0	YES	• NO
0	Staffing Booths	0	YES	• NO
0	Joining a committee	0	YES	• NO
0	Special Events	0	YES	• NO
0	Community Events	0	YES	• NO
0	Other (Please fill out):			

Confidential -Do not disseminate. This form contains confidential, trade-secret information and is shared only with the understanding that the contents and ideas will not be shared with third parties without the written consent of Club Parkinson's of Kansas. Developed 8/2021



Requested Information (Please Note: Due to the nature of our work, we request the following information):		
Have you ever been convicted of a crime?	o YES o NO	
Are there any criminal charges against you currently?	o YES o NO	
Have you ever been personal protection order against you?	o YES o NO	
Have you ever been involved in the abuse or neglect of a child or adult?	o YES o NO	
Have you ever been involved with a protection service agency?	o yes o no	
If you answered yes to any of the questions above, please explain when, where and the nature of the offense:		

Applicant's Statement

The information contained in this application is correct to the best of my knowledge and permission is hereby given for any investigation that may be necessary. I understand that misleading or untruthful information on this application may result in my dismissal from any volunteer job consideration.

Volunteers Printed Name

Date

Volunteers Signature