



VOLUNTEER APPLICATION



APPLICANT INFORMATION

Name _____

Home address _____
City State Zip

Telephone number (home) _____

Employer Name _____ Title _____

Work address _____
City State Zip

Telephone number (work) _____

E-mail _____

AVAILABILITY

Please circle all that apply

Day of week: M T W Th F S Sun

Time of day: Morning Afternoon Evening

AREAS OF INTEREST

Please check all that apply

I would like to work with girls who are:

- Beginners
- Intermediate
- Advanced
- No preference

Administration:

- Clerical: create brochures, flyers, etc.
- Membership / registration recording
- Fund raising

Activities:

- Registration
- Snacks
- Rules / etiquette
- On-course assistance

- Photography
- Mentoring
- Other _____

Sponsor/in-kind donations, etc.:

- Media
- Other _____

REFERENCES

Name _____

Name _____

Phone _____

Phone _____

Relationship _____
(supervisor, teacher, etc.)

Relationship _____
(supervisor, teacher, etc.)

I grant permission to call the references listed above

CONSENT FORM

I, an applicant for an LPGA-USGA Girls Golf site volunteer position with LPGA-USGA Girls Golf of _____ hereby attest that I have never been found guilty of, or entered a plea of nolo contendere (i.e., no contest) or guilty to a crime determined to be a misdemeanor or a felony, including abuse or neglect against a child, or assault, theft, arson or possession of any drug.

Applicant _____

Date _____

OR To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

Applicant _____

Date _____