

# Lost River Cave and Valley Volunteer Application

## Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Name of present employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Please give a brief explanation of why you wish to volunteer for Lost River Cave and Valley: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Emergency Information

Please list any physical conditions (allergies, reactions to bee stings, ect.), medications you are using, or any other information that might be helpful in case of an emergency:  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact (1): \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Emergency Contact (2): \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

## Skills and Experience

Educational background:    ( ) HS/GED    ( ) College    ( ) Graduate

Degree major: \_\_\_\_\_

Past Volunteer experience: Where? \_\_\_\_\_

When? \_\_\_\_\_ Duties: \_\_\_\_\_

Do you speak any languages other than English? \_\_\_\_\_

Skills, Interests and Hobbies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Volunteer Opportunities**

PLEASE CHECK THE PROJECT CATEGORIES IN WHICH YOU ARE INTERESTED

- Welcome Visitors, Trail Guide
- Field Trip/Educational Programming
- Adopt a Part of the Park, Litter Control
- Exotic Plant Removal
- Gardening, Grounds and Landscape
- Trail Work
- Carpentry/Woodwork
- Special Events Aide
- Office Work
- Special Interest or Expertise\_\_\_\_\_

Days and Times available to work:\_\_\_\_\_

Times preferred:\_\_\_\_\_



Have you ever plead guilty, or been found guilty by a jury, judge or court of any crime; misdemeanor or felony? If so, please describe:

\_\_\_\_\_  
\_\_\_\_\_

As a volunteer with Lost River Cave and Valley, I agree to act in a professional manner and exhibit a positive and pleasant attitude when dealing with the public, other volunteers and staff. I further agree that I will abide by all policies set forth for employees of Lost River Cave and Valley, honor my commitment to work as scheduled and that I have read and signed the volunteer waiver/hold harmless from. I also agree, if necessary, to submit to a criminal records check, attend any orientation sessions that might pertain to my volunteer duties at the cave, and if I must be absent from a scheduled commitment I will notify the supervisor on duty as soon as possible.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's signature if volunteer is under 18

\_\_\_\_\_  
Date

PLEASE RETURN TO:  
Friends of the Lost River Cave, Inc.  
2818 Nashville Road  
Bowling Green, KY 42101  
(270) 393-0077  
www.lostrivercave.com