

The Lands at Hillside Farms Volunteer Application Form

Please complete this form in its entirety. The information you provide will assist us in determining the right fit for you with our volunteer opportunities. Any volunteer over the age of 18 requires a criminal background check and PA Child Abuse Clearance check.

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treet Address:				
ity: State: Zip:				
est Contact Number:				
mergency Contact Number:				
mail:				
ate of Birth:				
arent/Guardian Name (if under 18):				
arent/Guardian Contact Number:				
mployment status:				
ull-time: Part-time: Retired: Student: Other:				
employed, please provide:				
ccupation:				
mployer Name:				
Employer Address:				
mployer Contact Number:				

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How did you	i hear about	The Lands a	at Hillside Farms?
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Have you worked/volunteered on a farm before? If yes, where and in what capacity?
Why are you interested in volunteering?
What days/hours are you available?
In what area(s) do you wish to volunteer? For instance: Barn Maintenance/Chores: Grounds Keeping:
Event Planning/Fund Raising: Physical Labor/Field Work:
Animal Care: Education: Other:

Medical Information:

Please list any medical conditions that The Lands at Hillside Farms should be aware of and any emergency medications or actions that may be necessary during your volunteer time at The Lands at Hillside Farms (e.g. nut allergies, asthma, epilepsy, heart conditions, other allergies, etc.)

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The information provided on this form is to the best of my ability true and correct. This volunteer application does not guarantee an opportunity at The Lands at Hillside Farms. I understand I must complete a Waiver of Liability form and am responsible for providing clearances for criminal background and Pennsylvania child abuse.

Signature: _____

Date: _____

If under 18 years of age:

Parent/Guardian Signature:

Date: _____

When completed, please forward this form to:

Guy Kroll, Director of Volunteers The Lands at Hillside Farms 65 Hillside Road, Shavertown, PA 18708

Or email to: guy@hillsidefarms.org