

# VOLUNTEER EVENT STAFF FORM FOR THOSE WORKING WITH YOUTH ACTIVITIES

\*Please fill out this form (there are two pages) completely and return it to Lothlorien Nature Sanctuary ASAP. Our USPS address is: Elvin HOME, Inc.

P.O.B. 1082

Bloomington, Indiana

47402-1082

USA

Legal name: \_\_\_\_\_

Name you go by at Lothlorien Nature Sanctuary (if different than what is listed above): \_\_\_\_\_

Your USPS address is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your telephone number is: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Your e-mail address is: \_\_\_\_\_

Are you at least 18 years of age? \_\_\_\_ Yes \_\_\_\_ No

If the answer is "yes" then how old are you? \_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_

If the answer is "yes" then please explain:

**Have you ever been in a crime involving children? \_\_\_\_ Yes \_\_\_\_ No**

**If the answer is "yes" then please explain:**

**On the back of these pages please add any additional information about yourself that you care to divulge. Also include an explanation about why you want to co-focalize youth activities at Lothlorien Nature Sanctuary and what you have to offer Elvin HOME, Inc. in general.**

**\*\*My signature verifies that the information on this form is completely true and you may check for your own verification. I am a trustworthy person to work with children. I have read and I understand the bylaws of Elvin HOME, Inc. and I have read and I understand the policies of Lothlorien Nature Sanctuary.**

**Legal signature: \_\_\_\_\_**

**Parent signature (if the applicant is under 18 years of age): \_\_\_\_\_**