

Special Outdoor Leisure Opportunities, Inc.

## **VOLUNTEER APPLICATION**

2022-2023

	Name:				
	Email Address:				
	Mailing Address:				
	Phone:				
Ī	Date of Birth:				
	Emergency contact name: Emergency contact relationship you?				
	Emergency contact pl	none:			
_					
	Please check one:	☐ New Volunteer		☐ Returning Volunteer	If returning volunteer, how many years have you volunteered?
	I am interested in:	□ Al	pine	☐ Nordic (Cross	
		(dowr	_	Country)	
	My skiing ability is:	☐ Beginner ☐ Yes ☐ Boots ☐ I will meet at		☐ Intermediate	☐ Advanced
	Do you have your own skiing equipment?			□ No	
	I would like to rent:			☐ Skis	
	Alpine (downhill)			☐ I will ride the	
	transportation	Swiss Valley		bus	
Please li	ist your past volunteer exper	rience:			
Do you	have any physical restriction	ns?			
Ι,	, give SOLO permission to conduct a limited background check on n (signature)				
Date:					