



## The Town of Green Mountain Falls

P.O. Box 524, 10615 Green Mountain Falls Road, Green Mountain Falls, CO 80819  
(719) 684-9414 [www.gmfco.us](http://www.gmfco.us)

### Committee Volunteer Application

Volunteer Position applying for: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

How many years have you been a resident of Green Mountain Falls: \_\_\_\_\_

Current Employer/Occupation: \_\_\_\_\_

Work Experiences that may apply: \_\_\_\_\_

Other Volunteer Experiences that may apply: \_\_\_\_\_

Any Special Qualifications that may apply to this volunteer position: \_\_\_\_\_

Other Current Volunteer Positions you hold: \_\_\_\_\_

Reasons for choosing this Volunteer Opportunity: \_\_\_\_\_

\*Please attach any other relevant information/documentation that would enhance your application.

By signing below, you acknowledge that the Town of Green Mountain Falls IS NOT liable for any harm and/or injury sustained while volunteering at any Town facilities or activities.

You also agree that all information you have provided in this application is true to the best of your knowledge.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Are you 18 years or older? YES \_\_\_ NO \_\_\_

If NO, Guardian Signature: \_\_\_\_\_