

Volunteer & Temporary Help Application Form

5401 Independence Road Weldon Spring, MO 63304 (636) 441-2110

Indicate the board, commission, committee, activity or event you wish to volunteer to serve on or assist with:

Planning & Zoning Commission Board of Adjustment Parks & Recreation Advisory Committee Independence Day Celebration Kids Fishing Day Other	Senior Citizen Day ❑ Santa's Visit ❑	
Applicant Information:	Today's Date:	
Name:	_ Are you at least 18 years old? Yes: 🗅	No: 🗖
Address:		
Home Phone:	Cell Phone:	
E-mail:Sig	gnature:	
How long have you lived in Weldon Spring?		
Briefly describe your experience or relevant ski	ills:	

If under the age of 18 parental/guardian consent is required:

Legal Guardian's Name:	Relationship:
Phone/E-mail:	_ Signature:

Notice: By signing above I agree that I have read and understand all of the following terms and conditions involving my time spent volunteering for the City of Weldon Spring. Furthermore, I agree that I hold the City harmless of any liability and responsibility for injury or damages received or sustained to myself or my personal property whether due to careless or negligent conditions/actions on the part of the City of Weldon Spring and their officials/staff.

FOR OFFICE USE ONLY			
Date Reviewed: Application Accepted: Yes: □	No: 🗖	Approved By: Assignment:	