



Volunteer Application

Please tell us about you and your interests:

Name: _____

Address: _____ City: _____ Zip: _____

Primary Phone #: _____ Secondary Phone # _____

Email: _____ Date of Birth: _____

How would you like to help?

What special skills do you have to offer the Village Center as a volunteer?

Availability: _____ Mornings _____ Afternoons _____ Evenings
_____ Weekend _____ Specific Days (please specify) _____

*As a condition of volunteering I give permission for the Village of Waunakee
to conduct a background check on me.*

Signature: _____ Date: _____

**Please drop off at the Village Center Welcome Desk
or mail this completed form to:**

Connie Gavinski
Waunakee Village Center
333 S. Madison St.
Waunakee, WI 53597