



# Volunteer Involvement Program Application

Date of Application: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ School \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Age \_\_\_\_\_ Grade Level \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Home Number \_\_\_\_\_ Work Number \_\_\_\_\_

Emergency Contact (other than parent) \_\_\_\_\_

Relationship \_\_\_\_\_ Phone number \_\_\_\_\_

Specify Shirt Size:     M             L             XL             XXL

Have you ever participated in volunteer work before?     Yes     No    If yes, please explain:

\_\_\_\_\_

In a short paragraph tell us something about yourself, any skills or special interest, and why you want to participate in the V.I.P Program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Please return completed application to:  
V.I.P. Coordinator, Grove City Parks & Recreation Dept.  
4035 Broadway, Grove City, OH 43123  
614-277-3058  
[vip@grovecityohio.gov](mailto:vip@grovecityohio.gov)





## *Volunteer Code of Conduct*

By signing this agreement, I, \_\_\_\_\_, agree to the following:  
(Please print name)

- I understand that the goal of volunteering is to engage and help the public, and my attitudes and actions should always further that goal.
- I agree to volunteer a minimum six (6) hours per year, for events sponsored or endorsed through the Grove City Parks and Recreation Department.
- I agree to work my entire volunteer shift as scheduled, to conduct myself in an appropriate manner, to dress in attire that follows the VIP dress code, to follow safety procedures, and to be prepared for my shift.
- I understand that if I cannot make a volunteer event, it is important to notify the Parks and Recreation office ahead of time by calling 277-3050.
- During my scheduled volunteer shift, I agree to stay in my designated area, and though I may have friends who are also volunteers at the same event, I understand that while I am at the event, my focus should be on my assigned activity.
- I understand that during the time I am volunteering, I will not use my cell phone for personal phone calls.
- I know that I represent the Parks and Recreation Department of the City of Grove City, and I promise not to engage in any activity that may cause harm to the Parks and Recreation Department, others or myself.
- I understand that failing to observe the above pledges, will result in my dismissal from the Volunteer Involvement Program.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature of Approval

\_\_\_\_\_  
Parent/Guardian Phone Number