



81 Crown Mountain Place
Building C, Suite 200
Dahlonega, GA 30533

P 706.867.0051
E info@gafw.org
www.gafw.org

VOLUNTEER APPLICATION

Your Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Please check the type of volunteer work in which you are interested:

In the forest:

- _____ Forest monitoring
- _____ Training to be a hike leader
- _____ Invasive species identification and removal

Other:

- _____ Writing for our newsletter, *Forest News*
- _____ Helping in the office with mailings
- _____ Helping with annual Fall Retreat at Vogel State Park and spring Wild & Woolly event
- _____ Member recruitment
- _____ Photography, graphic design
- _____ Webpage maintenance and updating

I would like to volunteer:

_____ On a regular basis. If so, what days/times are you available? _____

_____ On an as-needed basis for events.

Please describe any special training, skills, or education you have related to the work you would like to do: _____

Thank you for your interest in Georgia ForestWatch!

VOLUNTEER INFORMATION FORM

Thank you for serving as a volunteer for Georgia ForestWatch! Please complete the following information for our files.

Your Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Volunteer Start Date _____

Work and Location Assigned _____

Georgia ForestWatch Contact or Supervisor _____

If student, faculty advisor's name, University, and phone number:

Emergency Contacts

Name _____

Relationship to You _____

Phone _____ Email _____

Name _____

Relationship to You _____

Phone _____ Email _____