

SC Black Pride Volunteer Application

Please print

First Name Last Name
Address City/State/Zip
Telephone Date of Birth
Email:

Personal Information (please circle correct response):

Gender: Male Female

Physical Limitations: No Yes (Please Explain)

Education (highest level completed)

Grades 11-12 College Business Graduate School Technical/Vocational

Current work/occupation

List previous volunteer experience

Skills (List your skills and indicate proficiency level) Skilled Can Teach Amateur

1
2
3

Languages Fluent Read Write

1
2

Volunteer availability: (Circle all applicable)

Number of Days per week: 1 2 3 4 5

Monday Tuesday Wednesday Thursday Friday Saturday Sunday No Preference

In an emergency, notify:

First Name Last Name
Address
City/State/Zip Telephone

Preferred Area of Service:

___ Programming Committee ___ Sponsorship Committee ___ Entertainment Committee
___ Vendor Committee ___ Pride Guide ___ Publicity & Outreach Committee
___ Hospitality & Travel ___ Volunteer Committee ___ Member At Large

.....
(Signature/Volunteer)

.....
(Signature/Staff)

.....
(Date)