



## VOLUNTEER APPLICATION

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Apt. #: \_\_\_\_\_ Zip code: \_\_\_\_\_ Full time resident: \_\_\_\_\_  
Email address: \_\_\_\_\_ \*Part time resident: \_\_\_\_\_  
\*(If applicable, please list months available)\*

Age: (please circle) Under 18 18-25 26-45 46-64 65+

For volunteers under the age of 18, please fill in the information below:

Parent Phone #: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Scouts: (if applicable, please circle) Eagle Scout Boy Scout Cub Scout Girl Scout Brownie

Reason for Volunteering: (please circle)

- Community/Environmental Involvement
- Educational Requirement
- Other: \_\_\_\_\_

Area(s) of Interest: (please circle)

- Administrative
- Nature Trail Maintenance
- Fundraising
- Events
- Educational Outreach
- Guest Lecture
- Other: \_\_\_\_\_

Background/Experience: (optional)

---

---

---

---

Download, print, and mail your application to Marco Island Nature Preserve and Bird Sanctuary, P.O. Box, 983, Marco Island, FL, 34146; or email to [linda.t@MarcoEagleSanctuaryFoundation.org](mailto:linda.t@MarcoEagleSanctuaryFoundation.org)

**Thank You for Volunteering!**

The Marco Island Nature Preserve is a 501 (c) (3) Non-profit, 100% volunteer organization.