

CITY OF UNION, OREGON



City of Victorian Heritage

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Home of Buffalo Peak Championship Golf Course

VOLUNTEER INFORMATION FORM

Please complete and return to City Hall

Name _____ City Resident **Yes** **No**

Street Address _____ Registered Voter **Yes** **No**

Mailing Address _____

Phone _____ Work Phone _____ Cell Phone _____

Email Address _____ What's the best way to contact you? _____

Occupation _____ Employer _____

VOLUNTEER LABOR BOX

What department are you volunteering for? _____

What will you be doing? _____

Where will you be doing it? _____

Which City employee is in charge of you? _____

Approximately how many hours are you planning to volunteer? _____

VOLUNTEER COMMITTEE BOX

What committee are you volunteering for? _____

Have you served on other City committees before, which ones? _____

Are there any special skills, training, experience or knowledge you can offer to this committee? _____

Are there any potential conflicts of interest of which you are aware of? _____

Are there any days or times you can't come to a meeting? _____

Additional comments: _____

For all volunteer work, you need to keep track of your hours. The city is required to carry worker's comp insurance on you in case you are injured while doing work for the city. Please report dates and times.

Signature _____ Date _____