



1361 Wrighton Rd.
 Lothian, MD 20711
 website: www.jugbay.org
 e-mail: volunteers@jugbay.org
 (phone): 410-741-9330
 (fax): 410-741-9346

Volunteer Application

Date _____

Full Name _____ Nickname _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Date of Birth _____

E-mail Address _____

Occupation _____ Employer _____

Emergency Contact _____ Relationship _____

Home Phone _____ Work or Cell Phone _____

How did you hear about volunteering at Jug Bay?

What do you expect to gain by volunteering?

What skills can you bring to Jug Bay?

AVAILABILITY		
(check all that apply)	a.m.	p.m.
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Which volunteer projects interest you? (circle all that apply, blanks are for add-ins)

RESEARCH		EDUCATION		STEWARDSHIP		OTHER	
<input checked="" type="checkbox"/>	Birds	<input checked="" type="checkbox"/>	Canoe Leader	<input checked="" type="checkbox"/>	Clean-ups	<input checked="" type="checkbox"/>	Animal Care
<input checked="" type="checkbox"/>	Fish	<input checked="" type="checkbox"/>	Naturalist	<input checked="" type="checkbox"/>	Construction	<input checked="" type="checkbox"/>	Article Writing
<input checked="" type="checkbox"/>	Plants	<input checked="" type="checkbox"/>	Outreach	<input checked="" type="checkbox"/>	Habitat Improvement	<input checked="" type="checkbox"/>	Artwork
<input checked="" type="checkbox"/>	Submerged Aquatic Vegetation	<input checked="" type="checkbox"/>	Teaching Assistant	<input checked="" type="checkbox"/>	Invasive Plant Control	<input checked="" type="checkbox"/>	FOJB Activities
<input checked="" type="checkbox"/>	Stream Monitoring	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	Trail Maintenance	<input checked="" type="checkbox"/>	Office Assistance
<input checked="" type="checkbox"/>	Salamanders	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	Photography
<input checked="" type="checkbox"/>	Turtles	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Other Reptiles and Amphibians	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Water Quality	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

What medical, health, or other information should we be aware of?

FOR OFFICE USE ONLY:	
data in Access <input type="checkbox"/>	e-mail in GroupWise <input type="checkbox"/>
Date: _____	Initials: _____