



Luckiamute Watershed Council

Volunteer Interest Form

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Email: _____

Affiliated Group (if any): _____

Join our mailing list? Yes No

I am interested in assisting with the following types of activities:

- | | |
|--|---|
| <input type="checkbox"/> Restoration & Stewardship | <input type="checkbox"/> Festivals, Fairs & Workshops |
| <input type="checkbox"/> Monitoring | <input type="checkbox"/> Interpretive Walks |
| <input type="checkbox"/> Youth Education | <input type="checkbox"/> Office Work or Organizing |
| <input type="checkbox"/> Outreach Events | <input type="checkbox"/> Committee Work |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Other: _____ |

My preferred dates and times to volunteer are:

I am not available on the following days/times:

Where did you hear about volunteering with the Luckiamute Watershed Council?

- | | |
|---|--|
| <input type="checkbox"/> LWC Website | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> LWC Event: _____ | <input type="checkbox"/> LWC Employee or Volunteer |
| <input type="checkbox"/> Other: _____ | |

Professional Background and Other Experience *(Please describe any skills or experience related to your potential volunteer work with us):* _____
