



Dane County Parks Volunteer Registration

Office Use Only:	
<input type="checkbox"/> Non-profit	<input type="checkbox"/> Neighborhood Assn
<input type="checkbox"/> Service Club	<input type="checkbox"/> Garden Club
<input type="checkbox"/> Recreational User	<input type="checkbox"/> Business
<input type="checkbox"/> Educational	<input type="checkbox"/> Family
<input type="checkbox"/> Friends	<input type="checkbox"/> Other
<input type="checkbox"/> Youth	
Contact Person:	

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Email address _____ Fax _____

Home Phone _____ Cell Phone _____ Work Phone _____

Preferred way to be contacted: Mail Email Phone (please circle - cell, home, work)

I'm interested in volunteering in the following area(s) – please check all that apply:

Natural Areas

- Natural Areas Volunteer (circle your interest: seed collecting & scattering, field work, prescribed burns)*
- Natural Areas Manager (requires a time commitment)*
- Prairie Foster Parent (weed control; requires a time commitment)*
- Prairie Plant Propagators (includes sowing, transplanting & tending seedlings)*
- Seed cleaning (if you have allergies or respiratory problems, please volunteer for something else)*

Parks

- Campground Host*
- Trees (mulching, planting, monitoring)*
- Cleanup*
- Dog exercise areas*
- Research (includes wildlife & vegetation inventories)*
- Trails (construction, wood chipping, mountain bike, cross-country ski, equestrian)*

Special Events

- Youth Service Day*
- Earth Day project*
- Take a Stake in the Lakes*
- National Trail Day*

Other

- Office Support*
- Historical Research*
- Class Project/Service learning*
- Heritage Center*

Volunteer Release Form

I understand that my services are being offered on a voluntary basis without anticipation of financial remuneration. I grant permission for my photo to be used in any promotional materials produced by Dane County Parks and its partners. I shall indemnify and hold harmless the County of Dane, its Board and officers, agents and employees from and against all claims, demands, loss or liability of any kind or nature for any possible injury incurred during volunteer service.

Signature of Volunteer

Date

Print Name

Parental Consent if a volunteer is under the age of 18

I, _____ (parent/guardian) give my
(Print Name)

permission for

_____ to volunteer with the Dane County Parks
(Print Name)

Volunteer Program.

Signature of parent/guardian

Date

THANK YOU FOR VOLUNTEERING WITH THE DANE COUNTY PARKS VOLUNTEER PROGRAM!

*Please return to Rhea Stangel-Maier, Dane County Parks Volunteer Coordinator
5201 Fen Oak Dr. Rm 234, Madison, WI 53718
Phone: (608)224-3601 Fax (608)224-3774
stangel-maier@countyofdane.com*