



VILLAGE OF FOREST PARK  
COMMITTEE VOLUNTEER REGISTRATION FORM

Committee/Board Name: \_\_\_\_\_

What type of volunteer assignment are you interested in? \_\_\_\_\_

How did you learn of this committee? \_\_\_\_\_

Personal Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Company/School/Org: \_\_\_\_\_

Title or Position: \_\_\_\_\_

Emergency Contact : \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Specific Relevant Skills, Certifications or Knowledge : \_\_\_\_\_

Relevant Educational Degrees and/or Professional Designations: \_\_\_\_\_

Previous Board or Committee Service or Positions held:

Service/Position	Date Served	References
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature \_\_\_\_\_

Date \_\_\_\_\_