



City of Guadalupe Volunteer Registration

Please Print

First Name: _____

Last Name: _____

E-Mail Address: _____

Address (mail and residence if different):

Mail: _____ Residence: _____

City: _____ Zip Code: _____

Phone Number(s): Cell /Home _____

Business _____

Emergency Contact(s):

Name: _____ Relationship: _____

Emergency Contact Phone Number(s): _____

Volunteer Program(s) of interest: _____

Special Accommodations Needed: _____
