

Volunteer Application

Contact Infor	mation:		
Name		Birth Date	
Mailing Addr	ess		
 Email			
Cell Phone			
I am interesto	ed in volunteering for (check all you wo	ould like to commit to):	
Sailin	g		
	 □ Christeen □ Boat Maintenance □ Learn to Sail □ Junior Summer Program □ Veterans on Water □ Adaptive Sailing (ZigZag) 		
Educo	ation		
	☐ Christeen Sails☐ Junior Summer Program		
Regat	ttas		
	□ Race Committee (Do you have a properties)□ Registration□ Socials	powerboat? If so, what kind?)
Volun	teer Days		
	 ☐ Christeen Prep Week ☐ Memorial Day ☐ Youth Volunteer Week ☐ Columbus Day ☐ Veterans Day 		

Please list any certifications you have:	
Why do you want to volunteer at The WaterFront Center?	
In case of emergency, please contact: Name	
Relationship Cell Phone	
All information will be kept confidential	
Please note, all volunteers will be subject to a general background check and search of the National Sex Offender Registry. Also, if you are helping on <i>Christeen</i> sails, junior program or learn to sail program, you required to take the US Safe Sport certification.	will be
Where to Submit Completed Form:	

Email - info@theWaterFronCenter.org, email subject "Volunteer Application-Your Last Name"

Mail or Drop – The WaterFront Center, 1 West End Ave., Oyster Bay, NY 11771