



Sheltowee Trace Association Trail Volunteer Application

Please understand, the demographic information collected will only be shared with the Forest Service and the Park Service at the end of the year. It is used to justify additional trail funds for those agencies.

Thanks for understand and helping us out.

Name: _____

Address: (City, State, ZIP) _____

Phone: _____

e-Mail: _____

Birth Date: _____

Volunteering as a: Member of Trail Crew: _____ Adopt – A – Trail: _____ Individual Volunteer: _____

Are you a Veteran? Yes No

Do you have a diagnosed Disability? Yes No

Ethnicity/Race:

- White (Non-Hispanic)
- Black or African American (Non-Hispanic)
- Hispanic or Latino
- American Indian/Alaskan Native
- Asian
- Native Hawaiian or Other Pacific Islander
- Multiracial (Two or more)
- Prefer not to disclose

Emergency Contact

Phone: _____

Print Name: _____

Relationship: (Parent, sibling, friend, spouse) _____
