



# Florida Trail Association Volunteer Profile



## Contact Information

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First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_ Email \_\_\_\_\_

18 or older Yes No Race/Ethnicity (optional) \_\_\_\_\_

Password (for future ability to view profile online) \_\_\_\_\_

## Voluntary Dietary Information (all information is kept confidential)

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Allergies: \_\_\_\_\_

Dietary needs or foods and drinks that you prefer to include or exclude from you diet? **If none, please write none.**

## Emergency Contact Information

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Name \_\_\_\_\_ Relation \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

## Other Information

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Are you a member of the Florida Trail Association? Yes  No

T-shirt size? \_\_\_\_\_

How did you hear about our volunteer opportunities?

- \_\_\_\_\_ FTA Website
- \_\_\_\_\_ FTA Email
- \_\_\_\_\_ FTA Recruiting/Booth Event
- \_\_\_\_\_ Friend/Family Member
- \_\_\_\_\_ Local Newspaper/Radio
- \_\_\_\_\_ Other \_\_\_\_\_

What region would you like to volunteer in? (Check all that apply)

- \_\_\_\_\_ Panhandle
- \_\_\_\_\_ North
- \_\_\_\_\_ Central
- \_\_\_\_\_ South

Affiliation: (FTA Chapter or local group) \_\_\_\_\_

## Certifications

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Are you certified in any of the following:

Certification	Expiration
<input type="checkbox"/> First Aid/CPR	_____
<input type="checkbox"/> Wilderness First Aid	_____
<input type="checkbox"/> Wilderness Advanced First Aid	_____
<input type="checkbox"/> Wilderness First Responder	_____
<input type="checkbox"/> WEMT	_____
<input type="checkbox"/> Chain Saw: S212-Bucking and Limbing	_____
<input type="checkbox"/> Crosscut Saw: S212- Bucking and Limbing	_____
<input type="checkbox"/> FTA Activity Leader	_____

## Volunteer Interests and Experience

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What volunteer positions interest you? (Check all that apply)

<input type="checkbox"/> Trail Maintainer	<input type="checkbox"/> Trail Scouting & Project Planning
<input type="checkbox"/> Trail Crew Cook	<input type="checkbox"/> Office Administration/Events
<input type="checkbox"/> Trail Crew Leader	<input type="checkbox"/> GPS Coordinator

Do you have any experience with any of the following? (Check all that apply)

<input type="checkbox"/> General Trail Maintenance	<input type="checkbox"/> Business Leadership and/or management
<input type="checkbox"/> Trail Design and Construction	<input type="checkbox"/> Leading Crews or Groups
<input type="checkbox"/> Rigging/Griphest	<input type="checkbox"/> GIS Mapping

Briefly describe your hiking, camping, and backpacking experience.

Briefly describe your ability to use hand tools and perform arduous, manual labor.

What are you expecting from your experience while volunteering on the Trail?

Is there anything else you would like us to know about you?