



**PARKS, RECREATION &
COMMUNITY SERVICES**

375 W. Sahuarita Center Way
Sahuarita, AZ 85629
sahuaritaAZ.gov

Volunteer Program Application*

Applicant Name: _____ Age (if under 18): _____

Contact Phone: _____ Alternate Phone: _____

Email Address: _____

Home Address: _____

Proposed Program/Event/Assignment: _____

The Town of Sahuarita is not responsible for injuries or damages sustained as a result of volunteer participation. If selected, volunteer (parent/guardian if minor) will be required to sign an indemnification waiver.

Signature: _____ Date: _____

Parent/Guardian Signature (if minor): _____ Date: _____

Please return this form to: Parks, Recreation & Community Services Department
Attn: Recreation Manager
375 W. Sahuarita Center Way
Sahuarita, AZ 85629

By Email: Parks@sahuaritaaz.gov

Questions? Please call the Recreation Manager (520) 445-7852

*For Park/Trail Stewards Program, see separate application form and program guide