Sunrise Recreation & Park District
Volunteer Form

Name:_____Age:_____
(Last) (First)

Address:_____
(Street) (State) (Zip)

Phone Number:_____
(Home) (Work) (Cellular/pager)

Start Date/Time:_____ End Date/Time:_____

Please give a brief description of the activities that you would like to volunteer for and note any specific duties you are unable to perform.

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Please return this form to:

Sunrise Recreation & Park District
7801 Auburn Blvd., Citrus Heights, CA 95610
(916) 725-1585 (916) 725-2541 Fax