

Tremonton City
Volunteer Registration Form
102 S Tremont Street
Tremonton, Utah 84337

VOLUNTEER REGISTRATION

Name (First and Last): _____

Volunteer Work Start Date: _____

City Department: _____

Supervisor: _____

Physical Address: _____

Mailing Address: _____

Phone(s): _____

Previous/Current work or occupation: _____

Education: _____

Physical Condition (Physical constraints that would limit your abilities to perform the volunteer service duties).

I would like to become a volunteer at Tremonton City and contribute some of my time and talents. I understand that my services will be under the supervision of Tremonton City, and that I will be asked to complete a simple report form to account for my time.

Signature: _____

Date

Emergency Contact Information

Name and Relationship to you: _____

Home Phone: _____ Work Phone: _____

Home Address: _____

Work Address: _____

