

NJTLT VOLUNTEER APPLICATION



Name: _____ Address: _____

City: _____ Zip Code: _____ Date of Birth: _____

Email: _____ Parent/Guardian Email (if under 18 years old): _____

Cell Phone: _____ School/College: _____ Grade: _____

How did you hear about us: _____

Were you a participant in NJTLT's programs: _____ If yes, how many years: _____

Volunteer Job Preference: Tennis Education Office Administration

When are you available to volunteer? (select all that apply) Mornings 9am-12pm Afternoons 12pm-4pm Evenings 4pm-7pm Mon-Fri Sat-Sun

Years Coaching Tennis: _____ Tennis Certifications: PTR USPTA

First Aid/CPR/AED Certified: Yes No

VOLUNTEER JOB REQUIREMENTS

At NJTL of Trenton employees and volunteers are required to complete USTA SafePlay Training and a New Jersey state background check prior to their first day of employment. Contact Chris Liverman at cliverman@njtloftrenton.org for more details.

EMERGENCY CONTACT

NAME: _____ RELATIONSHIP: _____

CELL PHONE: _____ EMAIL ADDRESS: _____

VOLUNTARY EEO-1 DISCLOSURE (Reporting Purposes Only)

Gender: Male Female

Ethnicity: White African American Asian Hispanic/Latino

Native American/Alaskan Native Native Hawaiian/Pacific Islander