



Town of Reading
16 Lowell Street
Reading, MA 01867-2685

Genevieve Fiorente
Recreation Administrator
Reading Recreation Division
Phone (781) 942-9075
Fax (781) 942-5441
gfiorente@ci.reading.ma.us

Volunteer Application

Name _____

Address _____ Town _____ Zip Code _____

Phone Number (home) _____ (work) _____ email _____

Work Experience _____

Volunteer Experience _____

Special Training, Skills, Hobbies _____

Groups, Clubs, Organization Membership _____

When are you able to volunteer? _____

How many hours per week are you willing to volunteer? _____

Reason for volunteering _____

Please list 3 personal references with address and phone number below.

Name	Address	Town	Phone Number
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

I attest the above information is accurate.

Signature _____ **Date** _____

All Personal Information Will Be Kept Confidential