Volunteer Application



Contact Information

First Name	Middle Initial	Last Name	
Mailing Address			
	State		
Cell Phone	Home Phone	Work	Phone
Email			
Birth Date* *The U.S. Forest Service asks u	Race / Ethnicity* (opt	re our programs are reachir	ng a diverse population.
	t is only used for the purpose of demograph	, ,	
Dietary and Medical In	formation (All information wil	ll be kept confident	tial)
situation. <i>This information</i> needed. Do any of these co	n the crew leader and/or emergency pairs kept confidential and only used onditions prevent you from acting safe	d by the crew leader and ely on a volunteer trail of	nd first aid lead in the event it's crew? If none, please write none.
Allergies:			
nclude or exclude from you however, we are unable to pi	ing on the extended trips, please list a or diet? If none, please write none. No crovide specific meals, food brands, or d contact PCTA Volunteer Programs.	ote: We will do our best t	to accommodate your dietary needs;
Emergency Contact In	formation		
Name	Rela	ation	
	Home Phone		
Other Information			
Mhat siza of t shirt do you	ı wear?		
·			
How did you hear about o	ur volunteer opportunities?		
PCTA Website PCTA Email		ting / Booth Event ly Member	Local Newspaper / Radio Other

Registration Is there a volunteer project you would like to register for? Please include the project(s) name and dates here: **Volunteer Interests and Experience** What region would you like to volunteer in? (Check all that apply) Southern California (Mexico border to Kennedy Meadows) Southern Sierra Nevada: Central California (Kennedy Meadows through Yosemite NP) Northern Sierra Nevada: Central and Northern California (Yosemite NP through Lassen NF) Big Bend Region: Northern California and Southern Oregon (Shasta Trinity NF to Windigo Pass) Columbia Cascades: Central Oregon and Southern Washington (Windigo Pass to White Pass) ____ Northern Cascades: Central and Northern Washington (White Pass to Manning Park) What volunteer positions interest you? (Check all that apply) Trail Maintainer _ Office Administration / Events Trail Crew Cook ___ Packer (Do you have stock available for use? ___ Yes ___ No) ____ Trail Crew Leader _____ Other _____ ____ Trail Scouting & Project Planning Do you have experience with any of the following? (Check all that apply) ____ Trail Design General Trail Maintenance _____ Leading Crews or Groups New Trail Construction ____ GPS / Mapping ___ Rigging / Griphoist Briefly describe your hiking, camping, and backpacking experience. Briefly describe your ability to use hand tools and perform arduous, manual labor. Briefly describe any physical activities/sports that you participate in, including how often you engage in these activities. What are you expecting from your experience while volunteering on the Pacific Crest Trail? Is there anything else you would like us to know about you?