



14350 W. 151st Street
Homer Glen, IL 60491
708-301-0522
office@homertownship.com

Volunteer Form

Volunteer Name: _____

Signature: _____

Address: _____

Phone Number: _____ Cell Phone Number: _____

Email: _____

Emergency Contact Name: _____

Phone Number(s): _____

In the event the volunteer is younger than 18 years of age, a signature of the
volunteer's legal guardian is required below:

Guardians Name: _____

Guardians Signature: _____ Date _____

Please let us know what categories you are interested in volunteering for by
checking the box.

Seniors	
Veterans	
Special Needs	
Open Space / Civic Center	
Land Use	
Events	