Volunteer Information Form

Thanks for your interest in becoming a volunteer for The Bicycle Tree. Please fill out the following so we can get to know you better.

Date			Date of Birt	Date of Birth			
Full Name							
Email address							
Phone number							
Address (street) (optional)							
Address (city, state, zip) (optional)							
Availability: I would like to volunteer time(s) per week/month/year (circle one)							
Availability: Please indicate days and times available.							
Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
to	to	to	to	to	to	to	
Mechanical experience: (Please circle one and/or describe. No mechanical experience necessary!)							
1. little to no mechanical experience2. some experience3. quite experienced							
4. highly skilled bicycle mechanic 5. skilled mechanic with moderate bicycle-specific experience							
Other skills (Please circle all that apply and/or describe below):							
Spanish art/graphics outreach grantseeking event planning computers							
Please indicate any volunteering preference, if any (circle preferred activities). I would like to volunteer doing:							
Ν	laintenance work	kshops		From home			
Bike ride	es (fun rides, edue	cational rides)		Flyering/promotion			
	Youth programm	ning	Advoo	Advocacy work: education, infrastructure, policy			
P	eriodic/outreach	events	Other (plea	Other (please describe):			
Why are you interested in volunteering for The Bicycle Tree?							



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The Bicycle Tree is a project of Social and Environmental Entrepreneurs, a tax-exempt public charity according to section 501(c)3 of the Internal Revenue Code