



**Downtown Dade City Main Street, Inc.**

**Volunteer Application**

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Home Address \_\_\_\_\_  
Street address City State Zip Code

What types of tasks or activities are of interest to you?

- \_\_\_\_\_ Clerical
- \_\_\_\_\_ Decorating
- \_\_\_\_\_ Public Relations
- \_\_\_\_\_ Promotions
- \_\_\_\_\_ Mailings
- \_\_\_\_\_ Phone Calls
- \_\_\_\_\_ Other – please specify \_\_\_\_\_

What days of the week are you available? \_\_\_\_\_

What hours of the day are best for you to volunteer? \_\_\_\_\_

Do you have any physical limitations? \_\_\_\_\_ No \_\_\_\_\_ Yes

If Yes, explain \_\_\_\_\_

Please mail completed application to Dade City Main Street, P.O. Box 908, Dade City, FL 33526. If you have any questions, call 352-567-0284.