



St. Charles Parks & Recreation Board
1900 Randolph Street
St. Charles, MO 63301

Group/Individual Volunteer Application (Special Event)

Group/Organization/Individual (Please Print)			
Contact Name			
Street Address	City	State	ZIP Code
Telephone	E-Mail		
Number of adults (ages 13 and older) in your group: _____			
Number of children (ages 12 and under) in your group: _____			
Please describe your group (if applicable):			
Which Special Event:			
<input type="checkbox"/> Food Trucks In Frontier Park	<input type="checkbox"/> Pumpkin Carving		
<input type="checkbox"/> Hawaiian Luau	<input type="checkbox"/> Halloween Spooktacular		
<input type="checkbox"/> Party in the Park	<input type="checkbox"/> Bowling Jamboree		
<input type="checkbox"/> Hayrides	<input type="checkbox"/> Breakfast with Santa		
<input type="checkbox"/> Dogtober	<input type="checkbox"/> Other event.		
Are there any physical, age, or other limitations that we should consider?			
Skills and interests (Check all that apply)			
Signature of Individual/Group Coordinator		Date:	