



# VOLUNTEER APPLICATION

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to receive our email newsletter with updates on programs and volunteer opportunities? (circle one) YES NO

Check all that apply:

I am an **able-bodied individual who would like to act as a Sporting Buddy** for one or more of the following n.a.s.a. sporting activities

I have **land/equipment** that I would like to allow n.a.s.a. to utilize for disabled sporting activities.

I would like to participate on one of the following **n.a.s.a. committees**. Please put me in contact with the appropriate committee chairperson

- |   |  |
|---|--|
| <input type="checkbox"/> Fishing (summer)     | <input type="checkbox"/> Upland Game Hunting |
| <input type="checkbox"/> Ice Fishing (winter) | <input type="checkbox"/> Deer Hunting        |
| <input type="checkbox"/> Snow Skiing          | <input type="checkbox"/> Waterfowl Hunting   |
| <input type="checkbox"/> Golf                 | <input type="checkbox"/> Coyote Hunting      |
| <input type="checkbox"/> Water Skiing         | <input type="checkbox"/> Large Game Hunting  |
| <input type="checkbox"/> Sled Hockey          | <input type="checkbox"/> Bicycling           |
| <input type="checkbox"/> Pontoon Boat         | <input type="checkbox"/> Kayaking            |
| <input type="checkbox"/> Marksmanship         |  |

Please send this completed form to:  
North American Squirrel Association  
c/o Pat Lamke  
1593 East Young Drive  
Onalaska, WI 54650