



**POUDRE RIVER TRAIL CORRIDOR, INC.
Volunteer Program**

Poudre Trail Volunteer Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____

E-mail: _____

Are you a member of an organization interested in a group project? Yes No

Name of Group/Organization: _____

Other Contact Person: _____

Organization Phone: _____

Skills: Please write the top three ways you would like to help the Trail.

First Preference: _____

Second Preference: _____

Third Preference: _____

Other ways you would like to help:

I can usually help: Monday Tuesday Wednesday Thursday

Friday Saturday Sunday:

Mornings Afternoons Evenings