





MAINE SEA GRANT

Southern Maine Beach Profile Monitoring Program Volunteer Registration Form

Name		Date	
Address			
Street	City	Stat	ie Zip
Phone ()		()	
Seasonal Address			
Email		Date of Birt	h
Emergency Contact and Phon	e Number		
How did you find out about o Word-of-mouth Flyer/pamphlet	Website	□ News article/ □ Other:	
Please feel free to elaborate:			
Do you have any experience on experience is necessary, it	_	•	-
Please briefly describe why yo	ou are interested in	our program:	
There are four basic roles fille (More volunteer opportunities could be	•	•	interest you:
□ Field Data Collector □ Fie	eld Data Recorder	☐ Digital Data Entry	□ Team Leader
		[Con	tinue to the back









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Is there a time of the year that profiling once a m ☐ Yes ☐ No If yes, when?	nonth would not be feasible for you?			
When/how often are you available to volunteer?				
For risk management and the safety of children visiting our site, we may require a background check for volunteers/interns working with children. Do you give permission for us to obtain a background check? □ Yes □ No				
Signature:	Date:			
Print:	-			
*Please email completed applications to:				
So. ME Beach Profile Monitoring Program The Volunteer Coordinator at bpvolcoord@wellsnerr.org	* Alternatively, completed applications can be mailed to ATTN: Volunteer Coordinator So. ME Beach Profile Monitoring Program 342 Laudholm Farm Road Wells, ME 04090			

Thank you for taking the time to fill out this form. You will be contacted within two weeks by our volunteer coordinator concerning this application.