COTA Board of Directors Volunteer Application



Contact Information	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
I am interested in volunte	ering for the following opportunities.
Marketing	Open to any opportunity
Junior Leagues	Tournaments
Adult/Senior Leagues	Advocacy
Interests and Special Skil	Is
Tell us in which areas you are	interested in volunteering
Website Development/M	larketing
Writing	
Legal expertise	
Fundraising	
Tennis instruction/coach	ing
Event planning	
Facility construction	
League organizer	
What additional attributes	s or skills do you feel you could bring to COTA?

Person to Notify in Case of Emergency		
Name		
Street Address		
City ST ZIP Code		
Home Phone		
Work Phone		
E-Mail Address		

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.