



<p>Are you a current <i>FRIENDS</i> member? ____yes ____no</p>
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## FRIENDS of the Blue Ridge Parkway, Inc.

### APPLICATION FOR FRIENDS CHAPTER

What do FRIENDS' Chapters members do? The activities of a chapter are guided by the needs of the Blue Ridge Parkway in your area. You may be recruiting Parkway volunteers for special Parkway demonstration projects, recruiting groups to adopt Parkway trails, and organizing or assisting with special projects such as fundraising, planting trees, planning events, etc. The leadership for the chapter is provided by the Chapter's Steering Committee. The Chapter's Steering Committee meets monthly to discuss the needs of the group and how to best meet the needs. Chapters Steering Committee terms are generally three years and include co-chair/chair; secretary/communications, volunteer coordination and 2 to 3 other individuals.

I am willing to serve on the FRIENDS Steering Committee / Chapter in:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Waynesboro, VA ( Humpback Rocks Area) | <input type="checkbox"/> Peaks of Otter, VA | <input type="checkbox"/> Roanoke, VA             |
| <input type="checkbox"/> Rocky Knob/Meadows of Dan/Floyd       | <input type="checkbox"/> West Jefferson, NC | <input type="checkbox"/> Blowing Rock / Boone NC |
| <input type="checkbox"/> Asheville, NC                         | <input type="checkbox"/> Other: _____       |  |

<b>Name:</b>	
<b>Address:</b>	
<b>City, State and Zip Code:</b>	
<b>Phone:</b>	<b>Email:</b>

I can commit to monthly meetings if needed?  Yes  No

Relevant Experience and/or Employment (please attach a resume):

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Why are you interested in our organization and serving on this committee?

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Area(s) of expertise/contribution you feel you can make:

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Other volunteer commitments:

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What role are you willing to serve on this Steering Committee / Chapter:

- Chair     Co-Chair     Secretary     Worker Bee     Fundraiser

Return Application to: FRIENDS of the Blue Ridge Parkway, Inc. PO Box 20986 Roanoke, Virginia 24018

**Please use the back of form if you need more space, thank you!**

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***For Executive Director/Staff Use***

Application Form received: Date \_\_\_\_\_

Nominee Contacted: Date \_\_\_\_\_

Nominee has had a personal interview with executive director, board chair, other board member or NPS representative. Date \_\_\_\_\_

Nominee reviewed by the executive director/ board member. Date \_\_\_\_\_

Nominee interviewed by the board. Date \_\_\_\_\_

Action taken:

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United States Department of the Interior  
National Park Service  
Volunteer in the Parks Program

\_\_\_\_\_  
AREA

AGREEMENT FOR INDIVIDUAL VOLUNTARY SERVICES  
(Act of July 29, 1970 Public Law 91-357)

\_\_\_\_\_  
NAME: Last, first, middle initial (*please print*) TELEPHONE

\_\_\_\_\_  
ADDRESS: Street, city, state, zip code

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
Brief description of work to be performed, including minimum time commitment required. (Attach complete job description to this form)

*FRIENDS' Chapter work such as collection of donation boxes.*

I understand that I will not receive any compensation for the above work and that volunteers are NOT considered as Federal employees for any purpose other than tort claims and injury compensation, and I understand that volunteer service is not credible for leave accrual or any other employee benefits. I also understand that either the National Park Service or I may cancel this agreement at any time by notifying the other party.

I hereby volunteer my service as described above to assist the National Park Service in its authorized work.

\_\_\_\_\_  
Signature of Volunteer Date

The National Park Service agrees, while this arrangement is in effect, to provide such materials, equipment and facilities as are available and needed to perform the work described above, and to consider you as a Federal employee only for the purpose of tort claims and compensation for work related injuries.

\_\_\_\_\_  
Authorized Supervisor Date  
(Work authorized up to 40 hours pending review and signature of VIP coordinator.)

\_\_\_\_\_  
Signature of Park VIP Coordinator Date

TERMINATION OF AGREEMENT

Agreement Terminated on \_\_\_\_\_  
Month, Day, Year Signature of Park Coordinator

