



# Adult Volunteer Vacation APPLICATION

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Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ Today's Date \_\_\_\_\_

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Address \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_  
(or Country)

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Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Adult T-Shirt Size: S M L XL

E-mail \_\_\_\_\_

**Please provide information about the crew(s) you wish to register for below:**

**1<sup>st</sup> Crew:** \_\_\_\_\_  
Program Name \_\_\_\_\_ Start Date \_\_\_\_\_ Location \_\_\_\_\_ Fee \_\_\_\_\_

**2<sup>nd</sup> Crew:** \_\_\_\_\_  
Program Name \_\_\_\_\_ Start Date \_\_\_\_\_ Location \_\_\_\_\_ Fee \_\_\_\_\_

**3<sup>rd</sup> Crew:** \_\_\_\_\_  
Program Name \_\_\_\_\_ Start Date \_\_\_\_\_ Location \_\_\_\_\_ Fee \_\_\_\_\_

If the crew(s) is/are full, would you like to be placed on a wait list? \_\_\_Yes \_\_\_No  
(We will contact you if a spot opens up.)

Are you participating with a friend or relative? Please list their full name(s):  
\_\_\_\_\_

**How did you learn about AMC's Volunteer Trail Opportunities?**

\_\_\_ AMC Website \_\_\_ AMC "Outdoors" Magazine \_\_\_ Camp Fair \_\_\_ Newspaper \_\_\_ Web Search, Key Words: \_\_\_\_\_  
\_\_\_ Friends/Family \_\_\_ AMC Trails Email or Mailing \_\_\_ I am a Past Participant Other: \_\_\_\_\_

**Please answer questions completely and to the best of your ability.  
Attach a separate sheet of paper if you need more space.**

1. Have you ever participated with an AMC Volunteer Trail Crew? \_\_\_Yes \_\_\_No Please list dates & crew names:

2. Please describe what drew you to participate in this conservation based service work program.

3. Outline your hiking, camping, and trail work experience. (Detail weight carried, hike distances, programs, etc.)

4. Describe your regular physical activities and the intensity level.

5. What do you expect from this experience?

6. What skills, experiences, & interests do you have that would contribute to the success of the project and the group?

PARTICIPANT NAME: \_\_\_\_\_

PARTICIPANT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

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**PAYMENT INFORMATION:** Please pay for your trail crew at the time of application. If you wish to become a member or renew, complete all information below. (Your payment will be processed when the full Registration Packet is emailed to you). **Please choose 1, 2, or 3, below:**

1. \_\_\_ I am *NOT* an AMC Member – I am using the non-member fee.
2. \_\_\_ I am a current AMC Member – I am using the discounted member fee.  
Member #: \_\_\_\_\_
3. \_\_\_ I am *NOT* a current AMC Member, but I am using the discounted member fee and signing up for a membership now at the level indicated below:
  - \_\_\_ \$50 enclosed for a one-year, Adult AMC membership
  - \_\_\_ \$75 enclosed for a one-year, Family AMC membership
  - \_\_\_ \$25 encl. for a 1-yr., Junior AMC membership (under age 30)
  - \_\_\_ \$25 encl. for a 1-yr., Senior AMC membership (over age 69)

Crew Fee(s): \$ \_\_\_\_\_

Optional Membership Fee: \$ \_\_\_\_\_

**Total Due:** \$ \_\_\_\_\_

\_\_\_ Check or money order enclosed (payable to Appalachian Mountain Club)

**To pay securely with a credit card, please call 603-466-2727 with your card information.**

Registrar is available from Monday – Friday 8:30am – 4:30pm.

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**SUBMISSION INSTRUCTIONS:**

1. Please fill out electronically (electronic signatures are acceptable) or print and complete
2. Submit this application:
  - E-mail** to [amcvolprojects@outdoors.org](mailto:amcvolprojects@outdoors.org)
  - Mail** to AMC Trails Volunteer Programs Registrar, PO Box 298, Gorham, NH 03581
  - Fax** to (603) 466-2822
3. You'll receive an email from [amcvolprojects@outdoors.org](mailto:amcvolprojects@outdoors.org) when accepted

**DUE DATE**

Application Forms are due at least **4 weeks** before the start date of your desired crew.  
If mailing, please keep a copy for your records.

**We primarily communicate by EMAIL. Please add this email address to safe lists to ensure receipt of all correspondence.**