



Delaware Senior Olympics

Volunteer Application

Contact Information	
Name:	Age:
Address:	
City, State:	Zip Code:
Email:	
Phone #:	DSO# (if Applicable)
Please indicate preferred communication method (Email or Phone) <small>Circle one</small>	
Emergency Contact information	
Name:	Relationship:
Phone Number:	

Volunteer Interest - Please Check those areas of volunteering you are interested in

Sports

- | | | |
|------------------------------------------|----------------------------------------|------------------------------------------|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Badminton | <input type="checkbox"/> Baseball |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Billiards | <input type="checkbox"/> Bocce |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Cornhole | <input type="checkbox"/> Cycling |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Horseshoes | <input type="checkbox"/> Pistol Shooting |
| <input type="checkbox"/> Precision Rifle | <input type="checkbox"/> Pickleball | <input type="checkbox"/> Power Walk |
| <input type="checkbox"/> Race Walk | <input type="checkbox"/> Racquetball | <input type="checkbox"/> Shuffleboard |
| <input type="checkbox"/> Softball | <input type="checkbox"/> Swimming | <input type="checkbox"/> Table Tennis |
| <input type="checkbox"/> Tennis | <input type="checkbox"/> Track & Field | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Weightlifting | <input type="checkbox"/> Wii Bowling | <input type="checkbox"/> Wii Golf |

Programs

- | | | |
|----------------------------------------|-------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Walk Delaware | <input type="checkbox"/> Senior Group Challenge | <input type="checkbox"/> Other _____ |
|----------------------------------------|-------------------------------------------------|--------------------------------------|

Availability

- | | | |
|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Flexible | <input type="checkbox"/> Weekends | <input type="checkbox"/> Weekdays |
|-----------------------------------|-----------------------------------|-----------------------------------|

If you have any questions, please feel free to contact the office manager Janette Griffin at 302-736-5698 or admin@delawareseNIorolympics.org. Please Email or Mail to: DSO, 1121 Forrest Ave, Dover, DE, 19904