



# Volunteer Application

Thank you for your interest in volunteering with Pridelines!  
Our volunteers are an essential part of our family.

Date \_\_\_\_\_

## Personal Information

Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

May we add you to our email list?  Y  N Is it okay to leave you a voicemail  Y  N

What is the best way(s) to contact you?  Phone  Text  Email  Other \_\_\_\_\_

At which Pridelines location would you like to volunteer?

Pridelines Miami       Pridelines at the LGBTQ Visitor Center (Miami Beach)

Cutler Bay (Satellite location)

### Gender Identity

- Male
- Female
- FTM/Transmasculine
- MTF/Transfeminine
- Gender Non-Conforming
- Other: \_\_\_\_\_

### Sexual Orientation

- Gay
- Lesbian
- Bisexual
- Straight
- Queer
- Other: \_\_\_\_\_

### Gender Pronouns

- She/Her
- He/Him
- They/Them
- Other: \_\_\_\_\_

### Ethnicity

- Black/African American
- White
- Hispanic
- Asian
- Multiracial
- Other: \_\_\_\_\_

**What Languages do you speak?**

Primary \_\_\_\_\_ Secondary \_\_\_\_\_

**Emergency Contact Information**

Contact Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Contact Number \_\_\_\_\_

Alt. Contact Number \_\_\_\_\_

Can we say we are calling from Pridelines?  Yes  No

If no, what can we say? \_\_\_\_\_

**Education and Experience**

**Level of Education:**

High School/GED Degree \_\_\_\_\_

Some College

College Graduate Title \_\_\_\_\_

Post Graduate

Vocational Profession \_\_\_\_\_

**Please list any other skills or experience you have.**

\_\_\_\_\_  
\_\_\_\_\_

**You and Pridelines**

How did you hear about Pridelines?  
\_\_\_\_\_

How would you like to help at Pridelines?  
\_\_\_\_\_  
\_\_\_\_\_

Program Facilitation - Becoming a program facilitator is a great way to connect with the community on a personal level, by providing them with valuable educational experiences with peer-led experiences. (Circle the one(s) you are interested in facilitating):

Rainbow  
Circle

Youth  
Programs

HIV Testing/  
Counseling

Beyond the  
Binary

Young Adults  
Programs

Special Events (Circle the one(s) you are interested in assisting with):

SMART Ride

Pridelines  
Gala

Youth  
Gala

CampOUT

Miami Beach  
Pride Festival

Center Operations (Circle the one(s) you are interested in joining):

Volunteer  
Management

Technology  
Team

Kitchen  
Crew

Administrative  
Assistance

Committee  
Support

Reception  
Area

**What day of the week works best for you?**

(check all that apply)

Monday

Friday

Tuesday

Saturday

Wednesday

Sunday

Thursday

**Which shift(s) works best for you?**

(check all that apply)

Mornings

Afternoons

Evenings

Late Nights

**A Little About You**

What motivates you to volunteer for Pridelines?

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What experience do you have with volunteering?

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What do you hope to get out of volunteering with Pridelines?

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**Required Signature**

I certify that all the information submitted on this application is factually true and complete to the best of my knowledge. I authorize Pridelines to review my application, to research the information on this form, and to conduct background checks on me. I understand that I may be subject to termination as a volunteer should the information provided be false. If the information I have provided changes, I agree to inform Pridelines of the changes.

\_\_\_\_\_  
Name (Sign)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

A Level 2 background check may be required with an associated fee.

Thank you for your interest in volunteering with Pridelines! If you have any questions, please contact Volunteer@Pridelines.org (305) 571-9601 Ext. 112