



visitchillicothe.ohio.com

## Volunteer Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been convicted of a crime? If yes please explain. \_\_\_\_\_

\_\_\_\_\_

Days and Times usually available: \_\_\_\_\_

\_\_\_\_\_

Best time to contact you: \_\_\_\_\_

Return the form to the Ross-Chillicothe CVB by dropping off form or mailing to 45 E. Main Street, Chillicothe, OH 45601. You may also scan the completed form and email to [info@visitchillicothe.ohio.com](mailto:info@visit<span>chillicothe</span>.<span>ohio</span>.<span>com</span>).