

Volunteer Application

Volunteer's Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Are you 18 years of age or older? Yes No

What made you interested in volunteering your time at this community? (Circle best option)

Interested in Elderly School Requirement Community Service

Group or Organization Other _____

What skills or areas of interest would you like to share with the resident of this community?

When would you be available (i.e. time of day, day of week, etc.) to share your time with the residents of this community?

Other comments? _____

I understand that a background check might be done as part of my volunteer service.

I give my consent to use photographs, film footage of me, and/or my name for the purposes of illustration, advertising, publication and promotion of _____.

I understand this includes any internal or external publications (i.e. newsletter, local media, etc.).

Volunteer Signature _____

If under the age of 18, Parent or Guardian Signature _____

Date _____