



VOLUNTEER APPLICATION

Please print.

Date _____

Name _____

Address _____

Phone _____ Additional phone number _____

Email _____

Birthday (month/day) _____ Student? Name of school _____

Current/prior employment _____

Church you attend, if applicable _____

How did you hear about us? _____

Any medical or other types of concerns you want us to know about? _____

Emergency Name, Contact #, Relationship to You _____

What types of volunteering appeal most to you?

_____ Greeting donors & accepting donations _____ Cleaning facility

_____ Clerical assistance/reception desk _____ Technology/web assistance

_____ Interviewing clients _____ Store assistant/merchandizing

_____ Furniture pickup _____ General maintenance

_____ Cleaning/organizing of donations _____ Organizing donated items

What days/times are you available? _____