



VOLUNTEER'S FORM

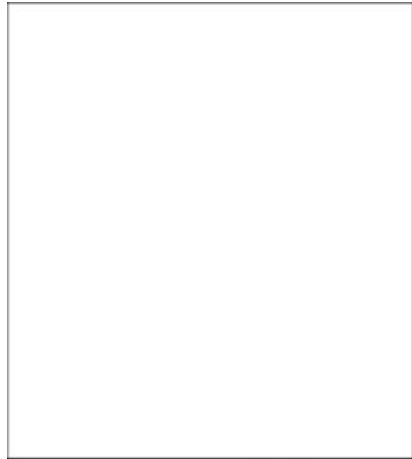
Our organization encourages the participation of volunteers who support our mission. If you agree with our mission, we encourage you to complete this application. The information on this form will help us find the most satisfying and appropriate volunteer opportunity for you. Thank you for your interest in our organization.

First Name:.....

Last Name:.....

Address:.....

City:..... State:..... Zip:.....



Phone: +..... Email:.....

Profession:.....

Any special talents or skills you have that you feel would benefit our organization?

.....

Interests: Please tell us in which areas you are interested in volunteering

Tennis coaching Skills Training (Sewing / Construction) Reading club Primary Teaching

Communication Help with special events/fundraising

When would you like to join us?.....

For how long would you like to work with us?.....

Please indicate days available: Mon Tues Wed Thurs Fri Sat

Times available: From:..... To:.....

Any physical limitations:.....

In case of emergency contact: +.....

Relationship:.....

As a volunteer to this organization I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature: Date:.....