



VOLUNTEER APPLICATION

Our organization encourages the participation of volunteers who support our mission. We encourage you to complete this application and all information on this form will be kept confidential.

Name: _____

Address: _____

Phone: _____ e-mail: _____

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

- Administrative
- Programs
- Events
- Fundraising
- Communication
- Other – please specify

AVAILABILITY:

Please circle days available: Mon Tues Wed Thurs Fri Sat

Times available: From _____ to _____

Thank you for taking the time to complete this form. Our volunteer coordinator will be in touch