



VOLUNTEER APPLICATION FORM

Fill out the form below so we can get to know you better and match you with the right opportunities.

PERSONAL INFORMATION

• Full Name:

• Date of Birth:

• Address:

• City/State/ZIP:

• Phone Number:

• Email Address:

EMERGENCY CONTACT

• Name:

• Relationship:

• Phone Number:

VOLUNTEER INTERESTS

• Areas you are interested in volunteering:

☐ Administrative/Office Assistance

☐ Community Outreach

☐ Fundraising & Campaigns

☐ Other:

• Preferred Schedule/Availability:

☐ Weekdays

☐ Evenings

☐ Weekends

☐ Flexible

AGREEMENT

I understand that as a volunteer, I will not receive monetary compensation for my services.

I agree to follow the organization's policies and respect the values of the community I serve.

Signature

Date,