



*Helping neighbors stay connected, active and independent*

## VOLUNTEER INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Best way to reach you:  Home Phone  Cell Phone  Email

### What is your typical availability?

Monday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Tuesday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Wednesday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Thursday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Friday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Saturday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
Sunday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening

Are there months/days/times when you are not available? *(please specify)*

### Please list all volunteer areas of interest:

<input type="checkbox"/> Transportation	<input type="checkbox"/> Light Home Maintenance
<input type="checkbox"/> Technology Assistance	<input type="checkbox"/> Friendly Home Visits
<input type="checkbox"/> Office Help	<input type="checkbox"/> Other*

\* *please list any other interests or talents you might share with members:*

How often would you be willing to volunteer? \_\_\_\_\_  
*(weekly, monthly, 2-3 times/year, etc.)*

Emergency Contact: *(name & phone)* \_\_\_\_\_

*Thank you for your commitment to Village Connections!*