

Name _____

Street Address _____

City _____ St _____ Zip _____

Home Phone _____

Work Phone _____

Email _____

How often are you available to volunteer?

One Time (Show Up when it fits)

Regular Position / Top 10 Jobs

During which hours are you available for volunteer assignments?

Weekday Mornings

Weekday Afternoons

Weekday Evenings

Random Times/Changes

Weekend Mornings

Weekend Afternoons

Weekend Evenings

Tell us in which areas you are interested in volunteering:

Students

Families

Mentoring

Administration

Conduct off-site food drive

Regular Donor

Special Event Team / Fundraisers

I'll work toward a Leadership Position

SPECIAL SKILLS, EXPERIENCE OR QUALIFICATIONS

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

If you have already received training from South Lake Community Ministries in any of these please circle:

Disaster Relief

Packing Backpacks

Making Deliveries

Home visits

Other: _____