

## Volunteer Application Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Please provide us with the *daytime* number(s) where best to reach you:

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

How did you hear about Wainwright House?

- Attended a program(s)
- Attended a party or wedding
- Website
- Newspaper
- Attended a Wainwright special event
- Attended the Healing Arts Fair
- Friend/family member/word of mouth

Volunteer Interest:

- Fundraising
- Marketing
- Outreach
- Special Events
- Healing Arts Fair
- Research
- Gardening
- Other \_\_\_\_\_

Availability:  Mon  Tues  Wed  Thurs  Fri  Weekends  Use own transport

How many hours a week could you donate to Wainwright? \_\_\_\_\_

Do you have any volunteer experience and if yes, what kind and for what organization?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Skills: Please check all that apply

- Art/Graphic/Web Design
- Data Entry
- Digital Photography
- Editing
- General Office
- Meet/Greet
- Research
- Word Processing
- Writing
- Other \_\_\_\_\_

Please Provide the Name, Address and Phone Number of a Person We Can Contact In Case of an Emergency.

Name: _____
Address: _____
Telephone: Home: _____ Work: _____ Mobile: _____

Please note that Wainwright House membership is a requirement (with the exception of volunteers for the Healing Arts Fair) and that new volunteers are interviewed and placed according to need. As these needs change, other opportunities for volunteering can become available.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_