



# Volunteer Application

Date \_\_\_\_\_

## Tell Us About Yourself

Name \_\_\_\_\_ Birthday (Day & Month Only) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Do you attend church?  Yes  No If yes, please provide name of church \_\_\_\_\_

Please list any hobbies or things you like to do \_\_\_\_\_

Please list any physical limitations that would need to be accommodated in order for you to volunteer at the Winston-Salem Rescue Mission? \_\_\_\_\_

Are there any special skills you have? \_\_\_\_\_

## Tell Us How We Can Use You

How often do you want to volunteer?  Weekly  Bi-weekly  Monthly  Holidays  Other

What days and times are you available to volunteer? \_\_\_\_\_

List any particular areas in which you would like to volunteer \_\_\_\_\_

## How did you hear about our ministry?

- Newspaper
- Church Team
- Friend
- Civic Club (please specify) \_\_\_\_\_
- Church Bulletin
- Other (please specify) \_\_\_\_\_
- Employee Team