



VOLUNTEER FORM

Name _____
Last First Middle Initial

Home Address _____
Physical Street City/State Zip Code

✓ Preferred Phone Contact

Home Phone: (_____) _____

Mobile Phone: (_____) _____

Business Phone: (_____) _____

Employer _____

Title _____

Address _____
Physical Street City/State Zip Code

Email Address _____

Professional Affiliations/ Trade Associations

Community Activities – list other community activities as a volunteer

Other Interests

Area of Interest / Committee Work

- | | | |
|---|---|--|
| <input type="checkbox"/> Development | <input type="checkbox"/> Planning | <input type="checkbox"/> Operations |
| <input type="checkbox"/> Programs | <input type="checkbox"/> Special Events | <input type="checkbox"/> Diseases/Medical Research |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Marketing | <input type="checkbox"/> Disabilities/Education Research |
| <input type="checkbox"/> Board Resource | <input type="checkbox"/> Administration | <input type="checkbox"/> Other |

Skills & Talents

- | | |
|---|--|
| <input type="checkbox"/> Legal expertise | <input type="checkbox"/> Financial management/accounting |
| <input type="checkbox"/> Marketing skills | <input type="checkbox"/> Fundraising/Development |
| <input type="checkbox"/> Program expertise | <input type="checkbox"/> Long-rang planning skills |
| <input type="checkbox"/> Communication skills | <input type="checkbox"/> Leading others |
| <input type="checkbox"/> Ability to govern | <input type="checkbox"/> Organizing |

Areas of Influence

- Access to foundations, corporations and individual philanthropists
- Contacts with professional and service organizations
- Media contacts
- Political contacts