

VOLUNTEER APPLICATION 3rd WILL'S CLUB INC

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Thank you for your interest in 3rd WILL'S CLUB INC.

Name:						
Address:	City:					
State: Zip:	Phone:					
Email:	Employ	er:		Position:		
Reference: Name: Email						
Reference: Name:	Phone:					
Any special talents or skills					zation?	
Interests: Please tell us in	•			•		
Events Progra	ms Fundraisin	ıg (Communi	cation		
Please indicate days availal SatSun	ole: Mon	_Tues	_ Wed	Thurs	Fri	
Times available:						
From to _						
Any physical limitations?						
In case of emergency conta	ict:					
As a volunteer of 3 rd WILL'S	S CLUB INC. I agre	e to abide	by the p	olicies and p	orocedures.	

As a volunteer of 3rd WILL'S CLOB INC. Tagree to able by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its members and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payments or rewards.

Signature: Dat	e:
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