



Volunteer Application Form

Living Brave Through Breast Cancer is a 501(c)3 nonprofit organization. Our mission is to be a provider of support and serve women and men diagnosed with breast cancer. We are always looking for volunteers who support our mission. If you agree with our mission to support the breast cancer community and are willing to be interviewed and trained in serving Living Brave TBC and the breast cancer community, we encourage you to complete our application. The information on this application form will be kept confidential and will help us find most enjoyable and suitable volunteer opportunity for you. We're excited to have you join the team!

Demographic:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Employer: _____ Position: _____

Interests: Please tell us in which area you are interested in volunteering for Living Brave TBC

- ___ Administration
- ___ Events
- ___ Program(s)
- ___ Fundraising
- ___ Social Media (Content)
- ___ Marketing

Please mark days you are available: Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___ Sat ___

Times available: From: _____ To: _____

Any physical limitations? _____

In Case of Emergency Contact: _____

Signature: _____ Date: _____

Email your application to team@livingbravetbc.org

As a volunteer of Living Brave Through Breast Cancer organization, I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and the organization, it's employees, team members, and associates, cannot assume any responsibility for any liability for any accident, injury, health problem(s), which may arise from any volunteer work I perform for Living Brave Through Breast Cancer organization. I agree that all the work I do is on volunteer basis with no financial exchange.