

Helping Hearts Volunteer Information Sheet

Name: _____ Email: _____

Address _____ City _____ State _____ Zip _____

Best # to reach you at: _____ DOB: ____/____/____

Areas of Interest

Please check all that apply

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Mailings | <input type="checkbox"/> Office Assistance | <input type="checkbox"/> Event Preparation |
| <input type="checkbox"/> Photographer | <input type="checkbox"/> Stall Mucking | <input type="checkbox"/> Barn Upkeep | <input type="checkbox"/> Grounds Upkeep |
| <input type="checkbox"/> Horse Handler | <input type="checkbox"/> Event Assistant | <input type="checkbox"/> Session Mentor | <input type="checkbox"/> Prayer Team |
| <input type="checkbox"/> Website Assistant | <input type="checkbox"/> Social Media Assistant | | |

Schedule

Please complete the following section to the best of your knowledge. We understand that schedules change, please indicate when and how you would like to make yourself available.

I would like to serve Hope for Hearts Horse Farm Inc on a regular basis

Weekly Bi-weekly Monthly

Days of the week that are best for me: Mon Tues Wed Thur Fri Sat

Times of the day that are best for me: _____ AM/PM to _____ AM/PM

I would like to be "On Call" You can contact me when help is needed for major projects (ie major mailings, farm events, etc)

Skills

- As a volunteer, what do you feel your strengths are?

- Of the skills you possess, which would you like to offer to the farm?

