

MVVCSO Initial Volunteer Sign-Up Form

Montezuma Valley Volunteer Community Service Organization (MVVCSO)

Welcome to MVVCSO! Thank you for volunteering to support our community. This one-time form ensures you're covered by insurance, keeps you safe, and helps us coordinate events like our food bank distributions. Your information is confidential and used only for MVVCSO purposes. Please complete and sign below.

Preferred Volunteer Activity (Check One or More):

☐ Food Bank Distributions ☐ Community Events (e.g., fundraisers) ☐ Other (specify: _____)

Personal Information

Full Name: _____ Nickname (Optional): _____

Phone Number: _____ Email (Optional): _____

Primary Residence (City/ZIP): _____

Street Address (# and street name): _____

Emergency Contact

Name: _____ Phone Number: _____

Availability

Preferred Contact Days/Times: _____

I'm available for (check all that apply):

☐ Weekly ☐ Biweekly ☐ Monthly ☐ As Needed

Accessibility Needs (Optional)

Do you have any needs to make volunteering comfortable? (e.g., mobility support, large-print materials):

Volunteer Agreement

I agree to volunteer with MVVCSO and follow its safety guidelines. I understand that MVVCSO maintains insurance coverage for my participation in authorized activities, and I authorize MVVCSO to include me in records for insurance purposes. I confirm that the information provided is accurate.

Signature: _____ Date: _____

Privacy Notice: Your information is stored securely and used only for volunteer coordination, insurance, and safety. It will not be shared outside MVVCSO without your consent.

For Office Use Only

Received By: _____ Date: _____

Verified for Insurance: ☐ Yes ☐ No

Added to Volunteer Roster: ☐ Yes ☐ No