

Corporate/Group Engagement Application

Thank you for helping create a healthy community that is connected across generations.

Contact Information Date Completed:				
Name of Company/Organization:				
Contact Name:		Title:		
Cell/Phone:		Email:		
Address (Street/Suite):				
City:	State:	Zip Code:		
Leader/Organizer Information (if different than above)				
Name:	Title:			
Cell/Phone:	Email:			
Address, If different than above:				
City:	State:	Zip Code:		
Do you have Employee/Colleague Resource Groups (ERGs)? ☐ YES ☐ NO				
If yes, which groups are interested in volunteering?				
Does your company have an employee volunteer day/month? ☐ YES ☐ NO If yes, when?				
Social media handles/# so we can market your experience:				
Join our mailing list? ☐ YES ☐ NO				
Group Experience Details *For All Ages asks for a minimum of 60 days' notice to coordinate for volunteer experiences.				
Approx. # in Group Has your group volunteered with us before? ☐ YES ☐ NO				
Type of Volunteer Opportunity Interested In (Check all that apply):				
☐ On-Going Group Volunteering ☐ One Time Group Opportunity				
☐ In-person ☐ Virtual Opportunity				
What are you preferred days (Check all that apply):				
Monday Tuesday Wednesday	Thursday	Friday Saturday		
How many hours are you looking to volunteer? (Check one) $\ \Box$ 1 to 2 hours $\ \Box$ 3 to 4 hours $\ \Box$ 5 or more				
Volunteers are needed for different programs and community ever group contribute in a meaningful way!	nts that take place	e throughout the year. We'd love to have your		
We offer social health literacy programs for your employees thealth. Are you interested in learning more?		·		



Preferred General Geographic Location:

For All Ages will work with you to assign your organization/group to one of our programs or events taking place during the year based on need. What goals/expectations does your group have for their experience? What type of interests does your group have? (check all that apply) Learn more about our events and programs here						
				\square Connecting Generations	☐ Character & Leadership	☐ Diversity Equity & Inclusion
				☐ Health & Wellness	☐ Creating Community	☐ Reducing Loneliness
Do you have an idea for a project? If so,	please explain:					
Please feel free to leave any additional of	comments or questions:					
Trouble foot from to loave any additional of	or quodione.					
Completing an application does not a guara	ntee that your group will be scheduled. W	hile we do our best to match groups with the				

Please submit to: Gary Sekorski, Chief Operating Officer

www.forallages.org

gary.sekorski@forallages.org

with your team. There is a possibility we may not be able to accommodate large groups or specific timing.

right opportunities, our first priority is For All Ages programming. For All Ages will contact you to discuss the best opportunity to work

All volunteers must review and sign the Volunteer Guidelines and Waiver of Liability form. Volunteers who participate with For All Ages on an on-going basis must complete the individual volunteer application and go through a background check. Read more

about volunteering here.