

Mighty Mitten Volunteer Community Assistance

At Mighty Mitten Volunteers, we believe in the power of community support and the beauty of paying it forward. In addition to seeking assistance, we encourage you to offer your skills, knowledge, or time to help others in our community. In the spirit of unity and kindness, please consider sharing the ways in which you can contribute to our community's well-being. Your willingness to lend a hand, whether it's offering a ride, sharing your expertise, or simply being a friendly neighbor, can make a tremendous difference in someone else's life. Together, we can create a network of mutual support that strengthens our community and fosters a sense of belonging.

To apply for the Mighty Mitten Volunteer assistance, kindly fill out the application below and choose from the following submission options:

Email the completed application to mightymittenvolunteers@gmail.com

Mail the application to [P.O. Box 326, Alanson, MI 49706](#)

Drop off the application at any of our local workshops.

Your dedication fuels our community's growth, and we can't wait to embark on this journey with you.

Personal Information:

1. Full Name:
2. Email Address:
3. Phone Number:
4. Address:
5. Emergency Contact:

What days and times you are available to receive assistance: (e.g., weekdays, weekends, mornings, afternoons, evenings):

Which areas of the Mighty Mitten Volunteer Program interest you the most? (Select all that apply)

- | | |
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| <input type="checkbox"/> Grocery shopping | <input type="checkbox"/> Prescription pickup |
| <input type="checkbox"/> Yard work/ clean-up | <input type="checkbox"/> Pet Assistance |
| <input type="checkbox"/> Home repairs | <input type="checkbox"/> Senior Care or Companionship |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Other (please specify): |

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Do you or anyone in your household have any medical conditions or special needs we should be aware of? (Yes/No)

If yes, please provide details:

In a few sentences, please explain why you are interested in the Mighty Mitten Volunteer Program and what you hope to achieve through your involvement:

What skills, knowledge, or support are you willing to offer to benefit our community? Please share any ways in which you can give back or assist others, whether it's through your expertise, time, or resources:

Have you ever volunteered for other organizations or community initiatives in the past? If yes, please briefly describe your experience:

Is there anything else you would like us to know about your request or situation?

I understand that Mighty Mitten Volunteers is a community-based volunteer organization and that the assistance provided is based on the availability and willingness of volunteers. I also understand that my contact information will be shared with volunteers for coordination purposes.

I agree to allow Mighty Mitten Volunteers to share my request for assistance within the community.

By submitting this application, I confirm that the information provided is accurate and I am interested in participating as a volunteer in the Mighty Mitten Volunteer Program.

Signature:

Date: