**Volunteer Interest Form**

 *Thank you for your interest in our volunteer opportunities. Please take a few moments to complete this form. Someone from our volunteer department will be in contact with you.*

|  |  |  |
| --- | --- | --- |
| **Last Name** | **First Name** | **Middle Name/Initial** |

🞏 **Mr.** 🞏 **Ms.** 🞏 **Mrs.** 🞏 **Miss** 🞏 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Preferred Nickname:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Home Address:***

|  |  |
| --- | --- |
| **Street Address** | **Apartment Number** |
| **City** | **State** | **Zip Code** |
| **Home Phone****( )** | **Business Phone****( )**  | **Cell Phone****( )** |
| **E-mail Address** |

**Is anyone else at this address a volunteer here? \_\_\_Yes \_\_\_No If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you ever volunteered for us before? \_\_\_Yes \_\_\_No If yes, when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you have any Special Medical Conditions/Limitations that we should be aware of?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Date of Birth:***

|  |  |  |
| --- | --- | --- |
| **Month:** | **Day:** | **Year:** |

|  |  |
| --- | --- |
| **I am volunteering with (Group Name):** | **If a student, what school?****Name of school contact:** |

*If you are a high school student, is this a project for school/girl scouts/boy scouts, etc?* 🞏 YES 🞏 NO

*Is this inquiry in regards to completing court-mandated community service hours? Please note: you must be 18 years of age to complete court-mandated community service hours with us.* 🞏 YES 🞏 NO

|  |  |  |
| --- | --- | --- |
| **Emergency Contact:** | **Emergency Phone Number:** | **Other Emergency Number:** |

***Availability:***

**🞏** Sunday **🞏** Monday **🞏** Tuesday **🞏** Wednesday  **🞏** Thursday **🞏** Friday **🞏** Saturday

***Frequency:* 🞏** Daily  **🞏** Weekly **🞏** Monthly **🞏** Other**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Time:***

🞏 Morning: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Afternoon: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Evening: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Areas in which I am interested in volunteering:***

🞏 Warehouse 🞏Pantry 🞏 Building Maintenance 🞏 Office/Clerical Work

🞏 Culinary Center 🞏 Special Events 🞏 Pick Produce 🞏 Food collection

🞏 Sorting/Repacking Food 🞏 Food Distribution 🞏 Delivery/Pick Up Driver 🞏 Education/Outreach

🞏Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Skills and Experience:***

🞏 Driving forklift 🞏 Driving delivery truck 🞏 Inventory 🞏 Stocking shelves/filling orders

🞏 Maintenance 🞏 Cooking instruction 🞏 Gardening 🞏 Computer technology

🞏 Computer skills 🞏 Data entry 🞏 Graphic/web design 🞏 Social media

🞏 Grant writing 🞏 Fund raising 🞏 Public presentations 🞏 Volunteer services/coordination

🞏 Bulk mailing 🞏 Public information 🞏 Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Languages:***

*Please list any languages in which you are fluent in speaking or reading/writing*

Language Fluent Speaking Fluent Reading/Writing

English 🞏 🞏

Spanish 🞏 🞏

Chinese 🞏 🞏

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RELEASE OF LIABILITY**

The undersigned individual will be engaged in volunteer service in the form of special events, warehouse, office and related duties for Columbia Pacific Food Bank (CPFB). This participation is voluntary on the part of the individual, who hereby releases CPFB, its director, employees, agents, Board of Directors, predecessors, successors, assigns, representatives, attorneys, subsidiaries, and affiliates; and allpe3rsons acting by, through or in connection with any of them from any and all claims, liabilities, damages, losses, demands, and actions of any nature whatsoever arising out of the individual’s participation in such duties. Such release extends to any injury, damage, loss, or liability incurred by the individual while engaged in such duties, whether occurring on or off the premises owned or operated by CPFB.

**PHOTO RELEASE**

I hereby grant the Columbia Pacific Food Bank (CPFB) permission to use my photograph in any and all publications, including web site entries, without payment or any other consideration in perpetuity.

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***Signature Date***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Signature of parent or guardian if volunteer is under 16 years of age***

***Thank you for your interest in volunteering with Columbia Pacific Food Bank!***