

Volunteer Application



MANLIUS
SENIOR
CENTRE

Well-being for mind, body and spirit

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	
Date of Birth	

Availability

During which hours are you available for volunteer assignments? Please specify the day(s).

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons

Interests

Tell us in which areas you are interested in volunteering.

- Board of Directors Educational Programs/Teaching a Class
 Committees Marketing
 Events Handy Helpers
 Centre Decorating Lead exercise class
 Fundraising Flea Market
 Program set-up/moving furniture History/help with archives
 Event clean-up crew Hospitality
 Shoppers/errand runners Volunteer coordination
 Dining Room

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Cell or Home Phone	