

# RIDGE COALITION FOR PEACE AND JUSTICE

VOLUNTEER APPLICATION FORM (Please print)

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_ Preferred method of contact \_\_\_\_\_

Occupation (Title, Employer) \_\_\_\_\_

If retired, last position held \_\_\_\_\_

If student, school attending \_\_\_\_\_ Major \_\_\_\_\_

If you reside in Paradise, year moved here \_\_\_\_\_ from \_\_\_\_\_

Hobbies, interests, volunteer activities, group affiliations

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Skills and expertise (for example: grant writing, computer, fundraising, crafts, photography/videography, baking, graphics, etc.)

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I am interested in participating in the following:

<input type="checkbox"/> Program Planning	<input type="checkbox"/> Events	<input type="checkbox"/> Flyer Distribution	<input type="checkbox"/> Baking/Cooking	<input type="checkbox"/> Phone Calls
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I am under age 18. My Parent or Guardian gives permission for me to volunteer.

Parent Signature, if applicable \_\_\_\_\_

Relationship \_\_\_\_\_

Date \_\_\_\_\_

Other useful information \_\_\_\_\_

For Office Use Only:  Contact  Interview  Referral  Outlook  Master List  File