



Volunteer Application

Name: _____ **Phone:** H (____) _____ - _____

Address: _____ **W** (____) _____ - _____

Birthday: (M/D) _____

What time slots would you are interested in volunteering?

9-12 _____ 12-3 _____ 3-6 _____ 6-9 _____

What days of the week are you available?

Mon Tues Wed Thurs Fri Sat Sun

Are you available to volunteer additional hours/days if needed? Yes No

Please tell us what brought you to the Ronald McDonald House. _____

If volunteering for hours, please list how many: _____

For what organization are you volunteering? _____

Do you have any special talents or skills? _____

Have you ever been convicted of a crime? Yes No

Tell us a little about yourself: _____

List 3 References: Name

Phone

1. _____
2. _____
3. _____

When would be a convenient time for a 1 hour orientation?(Circle)

Mon Tues Wed Thur Fri Sat Morning Afternoon

Emergency Contact: _____ **Phone:** _____