



**GIVE THE GIFT OF VOLUNTEERING**

**Adult Volunteer Application**

**General information:**

\_\_\_\_\_  
FIRST NAME / LAST NAME

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY / STATE / ZIP CODE

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
BIRTHDAY

\_\_\_\_\_  
HOME PHONE

\_\_\_\_\_  
CELL PHONE

\_\_\_\_\_  
WORK PHONE

**Employment status:**

employed    retired    other

\_\_\_\_\_  
CURRENT OR PREVIOUS EMPLOYER

**Please mark areas of interest:**

- Clerical (filing, copying, shredding, computer input)
- Resident Activities (games, crafts, trips, parties)
- Resident Services (friendly visitor, reading)
- Resident Escort (escort resident to activities)
- Adult Day Services (games, crafts, trips, parties)
- General Store (assist residents/guests, stock shelves)
- Child Care (work with children/help associates)
- Chapel/Pastoral (usher, reader, altar guild)

**Please mark the times you are able to volunteer:**

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning							
Afternoon							
Evening							

**Personal reference:**

\_\_\_\_\_  
NAME OF REFERENCE

\_\_\_\_\_  
PHONE

**In case of emergency please notify:**

\_\_\_\_\_  
RELATIONSHIP OF EMERGENCY CONTACT

\_\_\_\_\_  
PHONE

**Photography release:**

I give permission to use any photographs or video taken of me to promote the mission of Lutheran Home.

**Sign and date:**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE