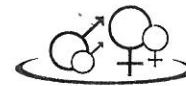


Wise Women Gathering Place
2488 Babcock Rd
Green Bay, WI 54313
920-490-0627



Volunteer Application

Contact Information

Name

Street Address

City ST ZIP Code

Home Phone

Work Phone

E-Mail Address

Availability

During which hours are you available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

Interests

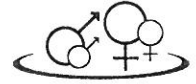
Tell us in which areas you are interested in volunteering

- | | |
|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Events |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Outreach |
| <input type="checkbox"/> Rock'n'Rest Station | <input type="checkbox"/> Brat Stand |
| <input type="checkbox"/> Newsletter production | <input type="checkbox"/> Where I can be useful |
| <input checked="" type="checkbox"/> mother's Helper | |

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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Previous Volunteer Experience

Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name

Street Address

City ST ZIP Code

Home Phone

Work Phone

E-Mail Address

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)

Signature

Date

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

WWGP Staff accepting application _____ Date _____