



Twice As Nice Mother & Child

Volunteer Application

Contact Information

Name	
Street Address	
City State Zip Code	
Home Phone	
Work Phone	
E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons
 Weekday evenings Weekend evenings

Interests

Tell us in which areas you are interested in volunteering:

- Donation sorting and organization
 Deliveries
 Events
 Field work (delivering brochures, hanging flyers, distributing information)
 Fundraising
 Pick-ups (item donations)

Previous Volunteer Experience

Please summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name	
Street Address	
City State 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 and your interest in volunteering with us!

Twice As Nice Mother & Child

P.O. Box 302

Lake Villa, IL 60046

1.866.546.0693 | info@twiceasnicemc.org | www.twiceasnicemc.org