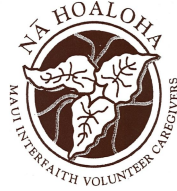


Neighbors Helping Neighbors



Volunteer Registration Form

Date _____

Name _____

Mailing Address _____
Street / PO Box City Zip

Home Phone _____ Work Phone _____

Cell Phone _____ Email Address _____

Birthdate _____ Gender Male/Female Congregation (if any) _____
(MM/DD/YYYY) (Circle one)

Emergency Contact Person _____

Address _____ Phone _____
Street City

Relationship to You _____

Your Interests / Skills / Occupation:

What Languages do you speak besides English?

Are there any Special Circumstances that impact your commitment or performance?

Driver's License # _____ Auto Insurance Company _____

Do you smoke? Yes / No Are you willing to visit a smoker? Yes / No / Maybe
(Circle one) (Circle one)

In which areas of the island are you willing to volunteer? (check the areas)

Upcountry () Wailuku/Kahului () Paia/Haiku () Lahaina () South Maui ()

REFERENCES (please list two persons we may call who are NOT family):

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

VOLUNTEER ASSIGNMENT CHOICES (please check all that you are willing to do):

- | | |
|--|--|
| <input type="checkbox"/> Friendly Visits | <input type="checkbox"/> Minor Home Repairs |
| <input type="checkbox"/> (a) senior living alone | <input type="checkbox"/> Yard Work/Gardening |
| <input type="checkbox"/> (b) senior living with family (\$12/hr) | <input type="checkbox"/> Meal Preparation/Delivery |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Light Housekeeping |
| <input type="checkbox"/> Shopping/Errands | <input type="checkbox"/> Going For Walks |
| <input type="checkbox"/> Telephone Calls | <input type="checkbox"/> Bills/Record Keeping |
| <input type="checkbox"/> Reading/Letter Writing | <input type="checkbox"/> Helping In Our Office |
| <input type="checkbox"/> Fundraising Assistance | |
| <input type="checkbox"/> Other _____ | |

Which days are you available to volunteer?

- Sunday Monday Tuesday Wednesday Thursday Friday Saturday

How many days a week can you volunteer? _____

Which hours are convenient for you?

- Morning Noon Afternoon Evening List which hours are convenient: _____ to _____

How did you hear of *Neighbors Helping Neighbors*?

MAHALO FOR YOUR INTEREST AND WILLINGNESS TO SERVE

NEIGHBORS HELPING NEIGHBORS

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