



Volunteer Application

Please complete the following information and return it to:

Gilda's Club Rochester
255 Alexander Street, Rochester, NY 14607

Name

Address

City & Zip

Home Phone

Work Phone

Cell Phone

Email

Place of Employment

Position

Emergency Contact Person and phone #

❖ **Special Skills or Talents** – List anything you'd like us to know about you.

❖ **Professional Credentials** – Please list any information which may be helpful for us to know.

❖ **Other pertinent info** – List any additional info about yourself including why you desire to be involved with Gilda’s Club.

AVAILABILITY

	Mon	Tues	Wed	Thurs	Fri
Days - 9am-5pm					
Evenings-5pm-8pm					

AREAS OF INTEREST

Program Team

- New Member Meetings
- Goodie Gang
- Workshop Facilitation

Noogieland Team (Children’s Programming)

- Family Events
- Noogie Nights
- Camp Open Arms

- Greeters/program support
- Library
- House Beautiful Team

Outreach & Special Events

- Community Outreach
- Fundraising Events

REFERENCES (one personal & one professional preferred)

Name _____

Address _____

Phone _____

Relationship _____

Name _____

Address _____

Phone _____

Relationship _____

READ AND SIGN

Have you previously been convicted of a felony ? _____

If yes, please indicate on a separate sheet of paper the convictions, dates and circumstances.

Have you ever been arrested for child abuse or a sexual offense? _____

I hereby authorize the appropriate police agencies to release information on any file record in my name pertaining to child physical or sexual abuse.

I certify that all information given on this volunteer application is true, complete, and correct.

Applicants Signature _____ Date _____