Volunteer Profile – 2019

Contact Information

Name
Street Address
City, ST, ZIP Code
Home Phone
Cell Phone
E-Mail Address
Social Media

Availability
During which hours are you available for volunteer assignments?

___ Weekday mornings  From/To ________ /_________
___ Weekday afternoons From/To ________ /_________
___ Weekday evenings  From/To ________ /_________

Interests
Tell us in which areas you are interested in volunteering

___ Administration
___ Events
___ Program Departments
___ Fundraising
___ Special Projects
___ Newsletter production

How did you hear about CAGI’s Volunteer Opportunities?________________________

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.
**Previous Volunteer Experience**
Summarize your previous volunteer experience.

**Person to Notify in Case of Emergency**

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Street Address</td>
</tr>
<tr>
<td>City ST ZIP Code</td>
</tr>
<tr>
<td>Home Phone</td>
</tr>
<tr>
<td>Cell or Work Phone</td>
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<tr>
<td>E-Mail Address</td>
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**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.

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<tr>
<th>Name (printed)</th>
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<tr>
<td>Signature</td>
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<td>Date</td>
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**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 profile and for your interest in volunteering with CAGI.