

Volunteer Registration

Welcome and thank you volunteers!

First Name:

Last Name:

Group or Organization Name:

Street Address:

City:

State/Province:

Country:

Zip Code

Telephone Number (Include Country/Area Code):

Cell Phone Number Used At Event (Include Country/Area Code):

Email Address:

T-shirt Size:

Are you able to stand on your feet for up to 8 hours? (You will have breaks to be able to sit down and relax.)

Physical Limitations:

Emergency Contact:

(check box) As a volunteer to this event, I understand that upon registering as a volunteer, Molly's House, Inc. is depending upon my participation. If for some unforeseen reason I am not able to fulfill my commitment, I will notify the Volunteer Chair at least 48 hours prior to my scheduled shift!

I Agree

(check box) I, the undersigned, acknowledge that I fully understand this agreement, and that I voluntarily execute the same without inducement or promise not contained herein:

I Agree

(check box) I agree to electronically sign this form, please type your full name:

Date:

Verification Code