



## **Volunteer Application**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

I am interested in helping with the following: (check those that apply)

\_\_\_ Events (set-up, break down, selling, promoting)

\_\_\_ Food Transporter (help organize deliveries)

\_\_\_ Office (phone calls, mail letters)

\_\_\_ Photographer (events, pets, newspaper)

\_\_\_ Board Member (strategic planning, decision making)

\_\_\_ Writing (for blog, newsletter)

\_\_\_ Foster Care (temporary foster cats or dogs)

Please list any special skills, interests, hobbies you would like us to know about:

\_\_\_\_\_

Previous volunteer experience:

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return form to:**

**Hands That Heal RI  
P.O. Box 696  
Scituate, RI 02857**

**Or email to: [Volunteer@hthri.org](mailto:Volunteer@hthri.org)**