

GOLDEN DAY ADULT DAY
VOLUNTEER APPLICATION

We, at Golden Day Adult Day, THANK YOU for your interest in being a volunteer with our group. The information on this form will be kept confidential and will help us find the appropriate volunteer opportunity for you.

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ Email _____

Employer: _____ Position _____

Any special talents or skills you have that you feel would benefit our group?

Interests: Please tell us in which areas you are interested in volunteering

Please indicate days\hours available: Monday Tuesday or Thursday

Golden Day Hours 10:00 to 4:00 each day

Time available: From _____ To _____

Any physical limitations? _____

In case of emergency contact: _____

As a volunteer of our group, I agree to abide by our policies and procedures. I understand that I will be volunteering at my own risk and that the group, its employees and affiliates, cannot assume any responsibilities for any liability for any accident, injury or health problem from any volunteer work I perform for the group. I agree that all I do for the group is volunteer. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature _____ Date _____