



## *Je m'adore* Volunteer Application

### Contact Information

Name:	
Street Address:	
City ST ZIP Code:	
Home Phone:	
Mobile Phone:	
E-Mail Address:	
Social Security #: (for background check)	
Date of Birth:	

### Availability

During which hours are you available for volunteer assignments?

- |   |   |
|---|---|
| <input type="checkbox"/> Weekday mornings   | <input type="checkbox"/> Weekend mornings   |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings   | <input type="checkbox"/> Weekend evenings   |

### Interests

Tell us in which areas you are interested in volunteering at *Je m'adore*?

<input type="checkbox"/> Charitable Events	<input type="checkbox"/> Celebrity coordination	<input type="checkbox"/> Administration
<input type="checkbox"/> Red Carpet Events	<input type="checkbox"/> PR/Media	<input type="checkbox"/> Sponsorships
<input type="checkbox"/> Weddings	<input type="checkbox"/> Vendor relations	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Private Events	<input type="checkbox"/> Research	<input type="checkbox"/> Donations
<input type="checkbox"/> Corporate Events	<input type="checkbox"/> Call Center	<input type="checkbox"/> Volunteer coordination
<input type="checkbox"/> Birthday Parties	<input type="checkbox"/> Newsletter production	<input type="checkbox"/> Audio/Visual
<input type="checkbox"/> Bachelorette/Bachelor Parties	<input type="checkbox"/> Graphic Design	<input type="checkbox"/> MC/Talent/Live Performances/Artists
	<input type="checkbox"/> Website design	

### 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.

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### Previous Volunteer Experience

Summarize your previous volunteer experience.

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### Person to Notify in Case of Emergency

Name:	
Street Address:	
City ST ZIP Code:	
Home Phone	
Mobile Phone:	
E-Mail Address:	
Relationship:	

### 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.

Name (printed)	
Signature	
Date	

## **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 application form and for your interest in volunteering with us.