



Volunteer Application Beaverton Hispanic Center

Contact Information

Name	
Street Address	
City, State ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Availability

During which days and hours are you available for volunteer assignments?

Day	Hours
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Interests

Tell us in which areas you are interested in volunteering

<input type="checkbox"/> Administration <input type="checkbox"/> Fundraising Committee <input type="checkbox"/> Events <input type="checkbox"/> Board Member <input type="checkbox"/> Newsletter production <input type="checkbox"/> Volunteer Coordination <input type="checkbox"/> Membership Coordination <input type="checkbox"/> Outreach Coordination <input type="checkbox"/> Grant Coordination <input type="checkbox"/> Donations <input type="checkbox"/> Education	Other (please list anything that you would be interested in doing that is not listed here)
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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

Name	
Street Address	
City, State ZIP Code	
Home Phone	
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How did you hear about us?

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/will result in my immediate dismissal.

Individuals who volunteer with Beaverton Hispanic Center its activities do so of their own free will and at their own risk. Volunteers acknowledge that they are assuming all risks associated with volunteer service, including risk of injury. In the event of personal injury, volunteers would be responsible for the full expense of any medical care or attention as well as other harm or expenses arising out of such injury.

Any volunteer under 18 years of age must have permission of and must be accompanied by a legal guardian.

Please attach Resume or Bio with references to this application.

Signature of Volunteer _____ Date _____

Print Name _____

(If under 18 years old)

Signature of legal guardian _____ Date _____

Print Name _____ Date _____

(Signature of Executive Director or authorized representative)

_____ Date _____

Title _____ Print Name _____