

VOLUNTEER REGISTRATION

Nature Coast Volunteer Center



CITRUS COUNTY COMMUNITY SUPPORT SERVICES
 2804 W. MARC KNIGHTON COURT, SUITE B127, LECANTO, FL 34461
 (352) 527-5950 * FAX (352) 527-5951 * E-mail: NCVc@bocc.citrus.fl.us

Date: _____ Referral Source/Current Volunteer Site(s): _____

Name: _____ Date of Birth: _____
First Middle Last Month/Day/Year

Address: _____
Street City Zip County

Home Phone: _____ Other Phone: _____ E-mail: _____

Emergency Contact: _____
Name Phone Relationship

Ethnicity (optional): American Indian/Alaskan Native Asian Black/African American
 Hispanic/Latino Native Hawaiian/Pacific Island White (Non-Hispanic) Other

do

PHOTO RELEASE

I do not consent and authorize the Nature Coast Volunteer Center to use my photograph and/or quotations from me in legitimate accounts and promotions of volunteer projects.

CONFIDENTIALITY AGREEMENT

I understand that, in the performance of my duties as a Nature Coast Volunteer Center volunteer, I may have access to confidential information. I understand that any violation of the confidentiality of this information may result in my dismissal or possible legal action taken against me.

RETIRED AND SENIOR VOLUNTEER PROGRAM

I understand that, if I am age 55 or older, I am eligible to register with RSVP, which may provide supplemental accident, injury, and liability insurance while driving to/from my site or while volunteering. The following information is required for registration with RSVP:

Beneficiary: _____ Relationship _____ Phone _____

Address _____

I will arrange to keep in effect automobile liability insurance equal to the minimum required by the State of Florida. If you do drive please complete this section:

Date of birth _____ Driver's License # _____

(Signature required for all applicants)

Signature of Applicant	Date
Signature of Parent/Legal Guardian (for child under 18 years)	Date

Tell Us About Yourself!

Availability/Days & Times Preferred:

Day	Anytime	Days	Evenings	Not Available
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please check any that apply to you:

Interests ~ What type of volunteer work would you like to perform?		
<input type="checkbox"/> Clerical/Office <input type="checkbox"/> Clowning <input type="checkbox"/> Disaster Response <input type="checkbox"/> Entertainment <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Home Delivered Meals <input type="checkbox"/> Homeland Security <input type="checkbox"/> In-home Services <input type="checkbox"/> Public Speaking <input type="checkbox"/> Respite <input type="checkbox"/>	<input type="checkbox"/> Senior Center <input type="checkbox"/> Shopping <input type="checkbox"/> Telephone Reassurance <input type="checkbox"/> Work with Children <input type="checkbox"/> Work with Elders <input type="checkbox"/>

Skills/Abilities ~ Where do your talents lie?		
<input type="checkbox"/> Business <input type="checkbox"/> Carpentry <input type="checkbox"/> CB Radio Operator <input type="checkbox"/> CDL (Commercial Driver) <input type="checkbox"/> Clerical <input type="checkbox"/> Computer <input type="checkbox"/> Disaster Relief/Recovery <input type="checkbox"/> Education/Outreach Other: _____	<input type="checkbox"/> Electrical <input type="checkbox"/> Entertainment <input type="checkbox"/> Ham Radio Operator <input type="checkbox"/> Homemaking <input type="checkbox"/> Legal <input type="checkbox"/> Foreign Language(s) (please list)	<input type="checkbox"/> Meal Aid <input type="checkbox"/> Medical, MD, RN, EMT. <input type="checkbox"/> Nutrition <input type="checkbox"/> Plumbing <input type="checkbox"/> Sand Bags (lifting 25 lbs) <input type="checkbox"/> Special Needs <input type="checkbox"/> Tax Preparation <input type="checkbox"/> Transportation <input type="checkbox"/> Veterinary/Animal Care

"Short & Sweet" Volunteer Opportunities		
Occasionally there are one-time, short-term volunteer assignments. Will you/can you help?		
<input type="checkbox"/> Bulk Mailing <input type="checkbox"/> Clerical/Office <input type="checkbox"/>	<input type="checkbox"/> Concerts and Events <input type="checkbox"/> Host/Hostess <input type="checkbox"/> Food distribution	<input type="checkbox"/> Meeting check-in <input type="checkbox"/> Phone calling <input type="checkbox"/>

Thank you for registering with the Nature Coast Volunteer Center!

