

Volunteer Application

**Volunteers come in
many variations.**

Interested?

*Please type or print clearly. All information will be treated confidentially.
Please answer all questions as completely as possible.*

Personal Information

Name _____

Address _____

City _____ State _____ County _____

Home Phone(____) _____ Cell Phone (____) _____

Email Address _____

Age:
13 – 20 years 21 and over

Employed:
Yes ☐ No ☐
If Yes, Full or Part time _____
Occupation _____

Education:

Highest Grade Completed: K 1 2 3 4 5 6 7 8 9 10 11 12 Associate Bachelor Master Ph.D. Other

Name of School _____ Course of Study/Major: _____

Emergency Contact

Name _____ Relationship _____

Contact Number () _____

Area(s) of Interest

<input type="checkbox"/>	Fundraising / Event Team
<input type="checkbox"/>	General Office Support (Filing, Answering Phones, Returning Calls/Emails/Faxes, etc...)
<input type="checkbox"/>	Staff Display or Info Booth at various community events
<input type="checkbox"/>	Marketing & Public Relations (Branding, Logo's, Media Messages, Webinars, etc....)
<input type="checkbox"/>	Marketing Materials: Flyers, Brochures, Catalogs, InfoGraphics, Business Cards, PostCards, etc.....
<input type="checkbox"/>	Website: Design/Development and/or Maintenance & Upkeep
<input type="checkbox"/>	OTHER: Please indicate how you want to help us

Availability

Please indicate day and times available to volunteer:

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Times							

Time Commitment: _____ One-Time Project _____ 3-Months _____ 6-Months _____ 1year

Previous Volunteer Experience

Organization	Dates of Service	Services Performed

Audio, Video, & Photo Consent

I grant full permission to Lady Butterflies to use my audio, video, or photos in this volunteer service for use in any broadcast, telecast, or any other written account of the event for publicity purposes, without compensation or remuneration. Yes ☐ No ☐

Declaration of Criminal History

All volunteers must complete background check and/or police record check

Have you ever been convicted of a felony, or, within last 7 years, convicted of a misdemeanor that resulted in imprisonment? Yes ☐ No ☐

References

Please list (3) three professional references – do not list relatives.

Name	Address or Email	# of years Known	Relationship to you

Licenses (Any Special License – Not Driver's License)

Type	State	Number	Expiration Date

Agreement and Signature

It is Lady Butterflies policy to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. By signing this Volunteer Application, You certify that the information provided is true, correct, and complete to the best of your knowledge. You give consent for Lady Butterflies to verify all information contained on this Volunteer Application as may be necessary regarding your volunteer services. You understand and agree that a background and/or police record check may be conducted before placement in any volunteer position. You release Lady Butterflies from any and all liability which might result from information obtained. You understand that your acceptance of a volunteer position with Lady Butterflies is on a conditional basis and that we reserve the right to terminate immediately with or without notice the volunteer service of any volunteer whose conduct, statements or performance in any way reflects negatively upon Lady Butterflies. You understand that there is no salary or other compensation for your services as a volunteer.

Signature

Signature

Date: _____
Date: _____

Volunteer
Executive Director

Return to: * Email: LB_Personnel@yahoo.com**