



CEREBRAL PALSY CENTER VOLUNTEER APPLICATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Driver's License Number and State \_\_\_\_\_  Male  Female

Do you have previous experience working with people who have cerebral palsy or other severe disabilities?  No  Yes If yes, please describe below:

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Have you ever been arrested for a felony?  No  Yes If yes, please describe below:

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Check the types of activities for which you would like to volunteer.

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| <input type="checkbox"/> Assist with meals and nutrition breaks                      | <input type="checkbox"/> Space utilization design                                 |
| <input type="checkbox"/> Teacher's Aide in the classroom                             | <input type="checkbox"/> Interior design and room staging                         |
| <input type="checkbox"/> Speak to a class about your hobby, business or job          | <input type="checkbox"/> Small Business development                               |
| <input type="checkbox"/> Building maintenance  | <input type="checkbox"/> Share musical talents                                    |
| <input type="checkbox"/> Grounds-keeping or gardening                                | <input type="checkbox"/> Volunteer Coordinator                                    |
| <input type="checkbox"/> Assist with special events like picnics and holiday parties | <input type="checkbox"/> Production assistant for the commercial mailing business |
| <input type="checkbox"/> Janitorial and building cleaning                            | <input type="checkbox"/> Disaster preparedness                                    |
| <input type="checkbox"/> IT consulting   | <input type="checkbox"/> Grant writing and research                               |
| <input type="checkbox"/> Development of marketing and PR materials                   | <input type="checkbox"/> Wellness program assistant                               |
| <input type="checkbox"/> Graphic design  | <input type="checkbox"/> Clerical and office assistance                           |
| <input type="checkbox"/> Newsletter writing  | <input type="checkbox"/> Use me where I am needed most                            |
| <input type="checkbox"/> Photography   | <input type="checkbox"/> Other, please describe                                   |
| <input type="checkbox"/> Fundraising events  | _____   |
| <input type="checkbox"/> Recycling   | _____   |