

# Volunteer Form

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## Contact Information

Name

Street Address

City

ST

ZIP Code

Home Phone

Work Phone

E-Mail Address

## Availability

During which hours are you available for volunteer assignments?

Weekday mornings

Weekend mornings

Weekday afternoons

Weekend afternoons

Weekday evenings

Weekend evenings

## Interests

Tell us in which areas you are interested in volunteering

Light Office Work

Annual Gala

Foundation Fashion Night

3<sup>rd</sup> Party Fundraising

Deliveries

Fundraising Committee

Other

## 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.

## Please return the volunteer form to:

Cabarrus Healthcare Foundation

Attn: Angel Overcash, Director of Special Events and Community Relations

920 Church Street North

Concord, NC 28025