Community Volunteer Form

Please download the document and fill out completely. Email the completed form to support@garycommunitypartnership.com

I can commit the following time to volunteering in the community

Day(s) of the week

Monday Tu			Tuesday		dnesday	7	Thursday	F	riday	Sat	urday	Sunday
Hour(s) per day								Numl	oer of o	ccurre	nces per	month
1	2	3	4	5	6	7	8	1	2	3	4	

I have a passion to work with

Sat. 9 - 11am The Community Garden Team** The Grant Writing Team

The Native Flower Garden Team

The Event Coordination Team

Sat 7 - 9:30am The Community Cleanup Team**

I would like to lead an activity

I would like to participate in an activity

Other information that you would like GCP to consider

Name

Cell Phone Number

^{**}Has predefined timelines to participate with youth in the program. You can volunteer independently