



## Volunteer Application

Today's Date: \_\_\_\_\_ Referred By: \_\_\_\_\_

First & Last Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

### I am interested in volunteering for: (Check all that apply)

Before/After School Centers

Counselor in Training  
Program

In-Office Projects

Summer Escape Day Camp

Evening Events

Annual Backpack  
Drive/Distribution Day

Summer Lunch Bunch

Weekend Events

Anywhere I am needed

### Work or Volunteer Experience

Present/Last Employer: \_\_\_\_\_

Positions: \_\_\_\_\_

Start/End Date: \_\_\_\_\_

### Other Information

School Name(if Student) \_\_\_\_\_ Grade (if Summer, grade in the Fall) \_\_\_\_\_

Do you have previous volunteer experience?  Yes  No

What Day(s) are you Available?  M  T  W  Th  F  Sa  Su

Time:  Mornings  Afternoons  Evenings

What experience do you have with Children? List all that apply

### References

 If you have volunteered in the past, please include organization name and contact in your references.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Organization/Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Organization/Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please bring form to the ERfC Administrative Office at the Enfield Office Suites,  
174 South Road, Suite 200, Enfield CT 06082 or email to [info@erfc.us](mailto:info@erfc.us)