

Ronald McDonald House Volunteer Profile

Name: _____ Organization: _____

Address: _____

Daytime Phone: _____ E-mail: _____

Previous volunteer experience: _____

Area(s) of Interest: Administrative Support Event Support Fundraising

House/Yard/Garden Meal Makers Program

If you selected Meal Makers Program, have you received and read the Meal Preparation Guidelines? Yes No

Times you prefer to help: Days Evenings Weekends Flexible

Do you have any previous Ronald McDonald House experience? Yes No

If yes, where? _____

How did you hear about us? _____

Check here if you are 16 years of age or older.

Volunteers under age 16 must be accompanied by an adult.

Do you have any special needs or health problems that need to be taken into account in determining your volunteer assignments? Yes No

If yes, what accommodations are needed? _____

Please list any hobbies or areas of interest: _____

Personal Reference: _____

Name, Email Address & Relationship

Personal Reference: _____

Name, Email Address & Relationship

I understand that I will receive no form of payment for services that I provide for the Ronald McDonald House Charities of Northeast Kansas and I agree to abide by all policies and procedures.

Signature

Date