# VOLUNTEER SIGN-UP FORM

*This form helps us match you with volunteer opportunities that fit your interests, availability, and needs. Please submit your completed sign-up form via email to contact@liftcommunityservices.org, or in-person at our office at 4448 Marine Ave.*

*If this form is not accessible to you please contact us for assistance.*

| **Personal Contact Information** | |
|---|---|
| **Name:** | |
| **Address:** | |
| | |
| | |
| **Telephone:** | |
| **Email address:** | |
| **Please list someone who we can call on your behalf in case of an emergency:** | |
| **Emergency Contact:** | |
| **Emergency Contact phone number:** | |

| **Your Volunteer Preferences** | | | |
|---|---|---|---|
| **I would prefer to volunteer:** | ☐ On a regular weekly basis | | |
| | ☐ On a regular monthly basis | | |
| | ☐ On an occasional basis | | |
| **I am available:** | Monday | ☐ Morning | ☐ Afternoon |
| | Tuesday | ☐ Morning | ☐ Afternoon |
| | Wednesday | ☐ Morning | ☐ Afternoon |
| | Thursday | ☐ Morning | ☐ Afternoon |
| | Friday | ☐ Morning | ☐ Afternoon |
| | ☐ Evenings | | |
| | ☐ Weekends | | |
| | ☐ My availability varies – please contact me | | |
| **My skills/experience:**<br><br>(*You don't need formal training – lived experience counts!)* | ☐ Customer service/welcoming people | | |
| | ☐ Organizing, sorting or stocking supplies | | |
| | ☐ Food preparation or kitchen support | | |

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|---|---|
| | ☐ Administrative or office support |
| | ☐ Fundraising |
| | ☐ Event support |
| | ☐ Creative skills (art, writing, music, crafts) |
| | ☐ Computer or basic tech skills |
| | ☐ Website and/or graphic design |
| | ☐ Tutoring, mentoring or teaching |
| | ☐ Comfortable with physical tasks (lifting, walking, etc.) |
| ***Optional**<br>Do you have any other skills, interests or experiences you'd like to bring to volunteering? | |
| ***Optional**<br>Languages spoken: | |
| ***Optional**<br>Is there anything we can do to make volunteering more accessible for you? (for example: mobility needs, preference for solo vs team tasks, etc.) | |

| **References**<br>*Please attach your resume with references, or list three professional and/or personal references for us to contact.* |
|---|
| **Name & Contact Information:** |
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| **Important Information for Volunteers** | |
|---|---|
| ☑ | **I agree to allow Lift to facilitate my criminal record check.**<br>*(We can support you through this process, and having a record does not automatically exclude you from volunteering)* |
| ☐ | **I agree that you may keep my personal information on file for up to three years.**<br>*(We respect your privacy. Your information will only be used for volunteer coordination and will not be shared outside of Lift).* |
| **Signature:** | **Date:** |