

Citrus County Senior Programs

Volunteer Form

Name: _____

Address: _____

City: _____ ZIP Code: _____

Telephone #: _____

Days Available: _____

Types of Service(s) You Want To Perform

(Please check all that apply)

Instructors
_____ *(Please provide information on class or hobby)*

Arts & Crafts
_____ *(Please list type of art or craft)*

Entertainment
_____ *(Please list what type of entertainment you would like to provide)*

Recreational Games
_____ *(Please list what games you are interested in leading/teaching/coordinating)*

Serving Food & Kitchen Help

Decorations for Events

Meals on Wheels route

<input type="checkbox"/> Beverly Hills	<input type="checkbox"/> Crystal River	<input type="checkbox"/> Homosassa
<input type="checkbox"/> Inverness	<input type="checkbox"/> Lecanto	<input type="checkbox"/> S. Dunnellon

Receptionist

PetMeals Program
 Deliver pet food to client's homes
 Help coordinate and/or package pet food

Other: _____
(List any opportunities or areas of interest you may have)

The Coordinator/Site Manager has gone over my duties, and I fully understand what is expected and I am willing to accept my responsibility and the job assigned to me.

Position Assigned

Signature of Volunteer

Date

Coordinator/Site Manager