

## GROUP VOLUNTEER REQUEST FORM

**Instructions:** For corporate or group volunteers with over 4 people interested in attending. One form per group required. Send completed forms to the volunteer coordinator Andrew Hayes – [AHayes@CEI.Elders.Org](mailto:AHayes@CEI.Elders.Org) Activities take place in our centers daily however, group volunteers are asked to consider preparing a project in advance to share with our participants.

Date: \_\_\_\_\_

Group Leader: \_\_\_\_\_ Email: \_\_\_\_\_

Organization: \_\_\_\_\_ Title: \_\_\_\_\_

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

Contact number: \_\_\_\_\_  One time event?  Recurring opportunity?

Type of organization:  School  Business  Not for Profit  Community  Other \_\_\_\_\_

Proposed project date: \_\_\_\_\_ Proposed Shift (AM 9-12pm, PM 12-3pm) \_\_\_\_\_ flexible? \_\_\_\_\_

Number of participants: \_\_\_\_\_ Will any volunteers be under 18 years of age?(Y/N) \_\_\_\_\_ How many: \_\_\_\_\_

Which is your desired center? \_\_\_\_\_

Would you be willing to try another center if choice is unavailable? \_\_\_\_\_

Proposed Activity: (please consult with Volunteer Coordinator for ideas or questions regarding activities)

Any additional needs or requirements?

Medical History: Do you have any volunteers have conditions that may limit their ability to perform volunteer duties?  Yes  No

If yes, please describe: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_