



MOUNT HOPE FARM

Volunteer Form

Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Phone: _____ Cell Phone: _____ Email: _____

Previous Volunteer Experience _____

Occupation (past occupation if retired) _____

Other information that will help us make a good match (Such as education, general interests/hobbies) _____

Availability and Volunteer Assignment Preferences

Please Check All That Are Applicable:

- I am Available: Morning (Mon – Fri) Afternoons (Mon – Fri) Evenings (Mon – Fri)
- Weekends Once A Week More than once a week
- One time only As Needed Other: _____

What area of the Farm most appeals to you for a volunteer assignment? _____

Emergency Contact:

Name: _____ Relationship: _____

Phone: (Home) _____ (Cell) _____