

Four Echoes at Grist Mill Pond

Volunteer Application

Four Echoes, a non-profit business of Stone Coast Community Church, encourages the participation of volunteers who support our mission as outlined in our *Volunteer Welcome Packet*. If you resonate with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Thank you for your interest in Four Echoes!

Personal Information:

Name _____

Address _____

City _____ State _____ Zip _____

Contact Number: _____ Email _____

Emergency Contact Name: _____

Relationship: _____ Contact Number: _____

References:

Personal Reference Name: _____

Relationship: _____ Contact Number: _____

Volunteering Information:

Reason for Volunteering: _____

How did you hear about us? _____

Any special talents or skill you have that you feel would benefit our organization? _____

Interest: Please tell us in which areas you are interested in serving at Four Echoes.

- | | |
|--|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Housekeeping |
| <input type="checkbox"/> Sales/Cashier | <input type="checkbox"/> Pick-up/Deliveries |
| <input type="checkbox"/> Donation Processing | <input type="checkbox"/> Building/Grounds Projects |
| <input type="checkbox"/> Events | <input type="checkbox"/> Marketing/Media |

Please indicate days available: MON TUES WED THUR FRI SAT SUN

Times available: From _____ to _____

Any physical limitations? _____

Any additional information you may feel is helpful or relevant to volunteering in our organization?
Please use the space on the back of this form as needed.

Signature:

As a volunteer of our organization, I agree to abide by its policies and procedures. I agree that the work I perform for the organization is on a volunteer basis and I am not eligible to receive any monetary payment or reward. I agree to represent myself in a manner that exemplifies the mission of Four Echoes and Stone Coast Community Church.

Signature: _____ Date: _____

For Office Use Only:

Reference Check by: _____ Date of Contact: _____

Interviewer: _____ Date of Interview: _____

Team Assignment: _____ Training Dates _____

Added to Homebase App: _____ Date Added: _____

Additional Notes: _____
