Huntington City Mission Group Volunteer Application 624 10<sup>th</sup> Street Huntington, WV 25701

Date

Type of Group (please circle)	Youth Adult Colle	ege or other:			
Group					
Group Address(Street)					
(Street)		(City)		(State)	(Zip)
Group Leader's Name					
Address(Street)					
(Street)		(City)	(State	e) (Zip)	
Phone (day)	Phone (eve)		Email address:		
Church or organization name/a	ddress and Email addres	ss			
How did you hear about theMis	sion?				
Has this group volunteered with	ı HCM before? Yes	No (Circle on	e) what department?		
In what program area of the mi	ssion would you like to v	work?			
What days and hours are you a	vailable?				
Group size (be as accurate and	honest as possible)				
How many males?	How many females?	Appro	ximate age range		
We understand that as voluntees are not limited to: Confidentiali volunteers, we are not due any or respectfully towards other volunteers, its Board of Directors, personal injury, property dama	ity of Guest Information, compensation for labor, nteers, staff and guests o employees and other vol	, Drug Free Work but are expected to of the Huntington ( lunteers workers f	place, and Dress Code. Vo act in a professional ma City Mission. We hereby rom any and liability tha	We also understand Anner and behave release Huntingt	nd that as ton City
Group Leader's Signature			Date		
Volunteer Coordinator (staff) S C:\My Documents\volunteer do		lication.doc	Date		