



Providing supplemental and emergency food • clothing • linens • housewares

A faith-based 501(c)3 Charitable Agency

To serve qualifying residents of Erie County fairly and with dignity.

Volunteer Application

Date: _____

PERSONAL INFORMATION

Name: _____

Address: _____

Cell #: _____ Home #: _____

Email: _____

Contact Preference (rank 1,2,3): ___ Text ___ Email ___ Call

Birth Month: _____ Birth Day: _____ (no year needed)

EMERGENCY CONTACT

Name: _____ Relationship: _____

Contact Number: _____

Have you volunteered before? Y N If yes, where: _____

How did you learn about Care and Share's Volunteer Program? (check all that apply)

___ Facebook ___ Flier ___ Word of Mouth ___ Newspaper ___ Friend ___ Church Other:

Preferred Day and Time: (circle all that apply for you)

Monday 9 – 11 am 11 – 1 1 – 3 pm Any time

Tuesday 9 – 11 am 11 – 1 1 – 3pm 3 – 5 pm 5 – 7pm Any time

Thursday 9 – 11 am 11 – 1 1 – 3 pm Any time

Volunteers are asked to make a minimum commitment of 3 months. Are you willing to make this commitment? (Initial) _____ **Thank you!** (over) ➡

Care and Share's Volunteer Affidavit

In volunteering for Care and Share of Erie County, Inc., I affirm that I am giving my time to an organization which provides material good for those in need in this community.

- I pledge to treat each individual who comes through our doors with grace, dignity, respect, and fairness.
- I will follow the policies and procedures established by the Board and Director of Care and Share to the best of my abilities.
- The good donated to Care and Share are the property of Care and Share, and I will NOT remove any goods from the premises or the trash, no matter what the condition, without the permission of the Executive Director.
- The goods donated to Care and Share are not for my personal use or gain in any way. I understand that my volunteer time at Care and Share will end if I do not abide by these standards.

Sign: _____ **Date:** _____