



Volunteer Registration

Date: _____

Name: _____

Phone: _____

Cell: _____

Email: _____

Occupation: _____

What hours of the day are you available? _____

Can you stand for periods of time? _____

Can you lift and/or transport/carry items? _____

Do you have computer skills? _____

Can you manage a cash register and/or count money back? _____

Any additional information you would like to provide:

What area of We Care would you like to help?

1. Throughout the year? (January – October) _____
2. Trim-A-Tree Festival? (September – November) _____
3. We Care Store? (October – December) _____
4. Set-up / leading up to the Telethon? (October – December) _____
5. During the Telethon? (December) _____
6. Set up the Wrap-up Auction? (December) _____
7. Wrap-up Auction? _____

Thank you for your interest in volunteering for We Care of Kokomo, Inc.