



VOLUNTEER INTEREST FORM

Thank you for your interest in Randolph Partnership for Children.

Our mission is to ensure strong families with healthy, well-prepared children by galvanizing our community to advocate for and invest in their future. We believe in facilitating great beginnings that lead to strong futures. We believe the community is an essential part of our children's path to success.

If our mission is a good fit and if you are willing to be interviewed and trained as a community volunteer, we encourage you to complete this interest form. The information on this form will be kept confidential and will help us match you with interesting, dynamic, fulfilling volunteer opportunities.

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Employer: _____ Position: _____

Tell us about your special talents or skills that you feel would benefit Randolph Partnership for Children:

Please check volunteer opportunities that interest you:

- | | |
|--|---|
| <input type="checkbox"/> Book distribution at holiday parades | <input type="checkbox"/> KidsReadyNC Implementation Team |
| <input type="checkbox"/> Informational booth at events/festivals | <input type="checkbox"/> NC Pre-K Committee |
| <input type="checkbox"/> Play Daze (outdoor play) | <input type="checkbox"/> Night of the Stars Committee |
| <input type="checkbox"/> Week of the Young Child events | <input type="checkbox"/> Professional Development Committee |
| <input type="checkbox"/> Office Help/label books, make copies, etc. | <input type="checkbox"/> Sustainability Committee |
| <input type="checkbox"/> Gala for the Children Committee: | <input type="checkbox"/> Long-term/other committee: _____ |
| <input type="checkbox"/> Silent Auction <input type="checkbox"/> Archdale/Trinity <input type="checkbox"/> Other _____ | |

Please circle days available: Mon Tues Wed Thur Fri Sat

Times available: _____

Physical limitations: _____

Emergency contact: _____

By signing, I understand:

- Volunteers for Randolph Partnership for Children must abide by the policies and procedures governing programs and functions of the agency.
- If I become a volunteer, I would be volunteering at my own risk and that Randolph Partnership for Children, its employees and affiliates cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform.
- Volunteers for Randolph Partnership for Children are not eligible to receive any monetary payment or reward.

Signature: _____ **Date:** _____