

## How Would You Like To Help?

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_

Day & Time best for you to volunteer \_\_\_\_\_

Check all that apply:

### 1. Administrative Help

\_\_\_\_\_ Bookkeeping/Accounting

\_\_\_\_\_ Clerical Help

\_\_\_\_\_ Computer Operations

### 2. Facility Maintenance & Improvement

\_\_\_\_\_ Carpentry/Painting

\_\_\_\_\_ Electrical/Plumbing Repair

### 3. Staff Assistance

\_\_\_\_\_ Medical/Dental Assistance (Please specify)

\_\_\_\_\_ Showing Children How to Draw / Paint / Dance/Play Music (Please specify)

\_\_\_\_\_ Helping with Meals & Snacks

### 4. Community Outreach

\_\_\_\_\_ Organizing Toy or Food Drives to Raise Funds

\_\_\_\_\_ Designing Promotional Materials (flyers, etc.)

### 5. Donations

\_\_\_\_\_ We would like to donate services

\_\_\_\_\_ We would like to donate products

\_\_\_\_\_ We would like more information on how we can get involved

Please list any other ways you'd like to help:

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### Please Mail This Form to:

Volunteer Application

Heartland Head Start

P.O. Box 1585

Bloomington, IL

61702 -1585