

# ROOTS Volunteer Form

Session: \_\_\_\_\_

Volunteer Names	Adult Volunteer (Check)	Junior Volunteer* Age/Grade	Volunteer Position
		/	
		/	
		/	
		/	

\* Jr. Volunteers are for students grades 7-9

\*\* You do not need to specify an area if you'd like to help wherever needed

Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_ Work Phone \_\_\_\_\_

Do you prefer to be contacted by \_\_\_\_\_ email \_\_\_\_\_ phone

Are all volunteers listed at this address, email and phone? \_\_\_yes \_\_\_no  
(if no, please provide the name, address and phone where they can be contacted)

Emergency Contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

