

WYOMING RESCUE MISSION VOLUNTEER APPLICATION

	Personal Information
Full Name:	Date:
Address, City, Zip	
Phone:	Email:
Highest Level of Education (School & De	egree):
Emergency contact:	
Birthdate: (If under 18 certain restriction	
Please list areas in which your skills and	d interest lie, including hobbies and other activities:
Why would you like to be involved in th	nis ministry?
Please list other community involvemen	nt/volunteer experience:
	the last 10 years? (other than minor traffic offenses) Yes \Box No \Box
Do you attend a local church? Yes	No If yes, which church?

Is there any other information, including medical conditions, WRM should be aware of:								
Volunteer Opportunities & Availability								
Below are a few select volunteer positions. Please mark the areas in which you would enjoy serving.								
Check out our website www.wyomission.org for details and updates on opportunities.								
Prepare or serve a meal. FIRST TIME IN KITCHEN ASK COOK FOR SPECIAL GUIDELINES! Rescued Treasures Thrift Store (processing donations, sorting, cleaning). Collection drives for WRM needs (Food, clothes, toiletries). Assist with fundraisers/events (plan, phone calls, distribute flyers, work events, etc.). Administration (filing, phone calls). Professional Volunteer. Provide area of expertise: Bible Study/Class instructor.								
Groups or individuals to help with special projects (maintenance, pantry sorting, etc.).								
Other: Please list opportunity:								
Please enter the days and hours you are usually available for a volunteer assignment (this does not commit you to all of the days you fill in, it just shows your availability):								
Sundays	Mondays	Tuesdays	Wednesdays	Thursdays	Fridays	Saturdays		
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2)								
		Acknowle	dgement & Cer	tification				
I understand that WRM is engaged in Christian ministry and that, within the context of that ministry, I am volunteering to perform duties without any expectation of compensation. I declare I am serving as a volunteer and not an employee. I realize WRM will not be held responsible for any accident or injury that may occur while I am a volunteer. I grant WRM the right to use my image in photos, videos, and other likeness for furthering the purpose of WRM in electronic and print media. I hereby affirm the information I provide on this application is correct and that my references may be contacted. I have received the Volunteer Guidelines and agree to abide by them.								
Signed:					Date:			
Jigiricu.					Date			

Revised 8/1/19 2