CHRISTMAS IN APRIL 7915 Malcolm Rd. Clinton, MD 20735 DEADLINE TO VOLUNTEER MARCH 1

Phone: 301/868-0937 Fax: 301/868-1053

VOLUNTEER SIGN UP FORM

Volunteers must be at least age 14 to participate. Students age 14-17 must request a Parental Permission Form from Christmas in April, and cannot work at house site without a completed form. Student Groups must have a 4:1 ratio of students to adults. Groups should be no larger than 20 people. Additional volunteers from an organization can sign up as an additional group.

Group Contact Person will notify all volunteers from t Group Contact Person would like Christmas in April		NO () NO ()					
CONTACT NAME: (PLEASE PRINT)		_					
ORGANIZATION:							
CONTACT ADDRESS:							
CONTACT PHONE - HOME () WORK ()							
EMAIL ADDRESS:							
phone number. I am willing to help in one or more of the followicarpentry clean up electrical	general labor glazing gopher telephoning landscaping painting other						
PLEASE PRINT CLEARLY	PLEASE PRINT CLEARLY						
Name	Name						
Address	Address						
City State Zip	City State Zip						
Phone - H W	Phone - H W						
Special Skills, if any	Special Skills, if any						
Age, if teenager	Age, if teenager						
Name	Name						
Address	Address						
City State Zip	City State Zip						
Phone - H W	Phone - H W						
Special Skills, if any							
Age, if teenager	Age, if teenager						

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Please select from the categories below and list all appropriate ones in the special skills section along with your name, address and phone number.

I am willing to help in one or more of the following areas (list under special skills section):

carpentry clean up electrical general labor glazing gopher telephoning roofing plumbing plastering landscaping painting other

I have a truck and am willing to: ___pick up & deliver supplies ___remove trash

PLEASE PRINT CLEAF	RLY		PLEASE PRINT	CLEARLY	
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone - H	W _		Phone - H	W _	
Special Skills, if any _			Special Skills, if any _		
Age, if teenager			Age, if teenager		
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone - H	W _		Phone - H	W _	
Special Skills, if any			Special Skills, if any _	<u>.</u>	
Age, if teenager			Age, if teenager		
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone - H	W _		Phone - H	W _	
Special Skills, if any _			Special Skills, if any _		
Age, if teenager			Age, if teenager		
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone - H	W _		Phone - H	W _	
Special Skills, if any Age, if teenager			Special Skills, if any _ Age, if teenager		