SCHOWALTER VILLA VOLUNTEER FORM

Name:	Phone:		
Address:			
Street Address	City	State	Zip
E-mail:	Date o	f Birth:	
Emergency Contact Name:	Phone:		
Are you under the age of 18?	YES or NO		
and summary offenses, which	of any crimes in the past 10 year have not been annulled, expuns	ged or sealed by the	
How did you learn about us?			
Please check all that may be of	f interest (this does not lock you	in to that particular	r activity).
y		F	,,,.
* <u>Activities</u>		3.5 3.5	
		_ Music & Memory	
		_ Crafts/Decorations	S
		_ Movies/Popcorn	
Joy Ride	Child visits	_ Wheelchair rides	
*Spiritual Life Activities			
Morning dining room dev	votions Sunday Scho	ol Lesson	
Music (singing or leading		in the Chapel	
Piano/organ for Chapel	Volunteer Vi	siting (one-on-one)	
Worship leader (reading)			
*Front Desk			
Administrative Tasks:			
Front desk/welcoming	Photocopy pr	roiects	
Computer typing/input	1 2 1	ffice help requests	
_ 1 71 6 1	1		
* <u>Library</u>			
Library assistant	Assist reside	nts with books	

*DietaryBuffet dining (main)Home Delivered Meals	Buffet dining (healthcare)
*Maintenance	
Gardening/Landscaping	g projects
*Choir	
Villa Ladies Ensemble	Men's Choir
* <u>Villa Partners</u> Main Street Gifts	
Garage Sales (multiple times	s a year)
Set up Pricing	g ItemsWork sale day
Set up/Take down Publicity	Where help is needed most
•	nteer auxiliary of Schowalter Villa)
Villa Partners Board: (volume Council Member I am interested in volume I	olunteering, please contact me:
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Villa Partners Board: (volume Council Member I am interested in volume Anytime After this date	olunteering, please contact me: