



## Volunteer Opportunities & Preferences

There are numerous ways you can help us give parents of VIP kids a break. Please check the ways in which you wish to serve:

- |   |   |
|---|---|
| <input type="checkbox"/> Buddy (work with a VIP)  | <input type="checkbox"/> Arts & Crafts room facilitator |
| <input type="checkbox"/> Buddy (work with a sibling)  | <input type="checkbox"/> Video room facilitator         |
| <input type="checkbox"/> Office/Administrative helper (phone calls, mailings, data entry, etc.) | <input type="checkbox"/> Game room facilitator          |
| <input type="checkbox"/> Application/applicant processor  | <input type="checkbox"/> Recreation room facilitator    |
| <input type="checkbox"/> Community liaison/promoter   | <input type="checkbox"/> Greeters                       |
| <input type="checkbox"/> Special event helper for parents                                       | <input type="checkbox"/> Notary                         |
| <input type="checkbox"/> Nurse  | <input type="checkbox"/> Registration Table             |
| <input type="checkbox"/> Power Point/Computer Operator  | <input type="checkbox"/> Family Host during Orientation |
| <input type="checkbox"/> Photographer   | <input type="checkbox"/> Set-Up & Clean Up Coordinator  |
| <input type="checkbox"/> Guitarist  | <input type="checkbox"/> Set-Up & Clean Up assistants   |
| <input type="checkbox"/> Music leader   | <input type="checkbox"/> Prayer partner                 |
| <input type="checkbox"/> Story teller   | <input type="checkbox"/> Donor of items                 |
| <input type="checkbox"/> Manipulatives room facilitator   | <input type="checkbox"/> Other _____                    |
|   | <input type="checkbox"/> Please contact me              |

Dates I Can Serve at a Buddy Break on Saturday (Pick two minimum) During 2016

- |                                    |                                       |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> May 21    | <input type="checkbox"/> September 17 |
| <input type="checkbox"/> June 25   | <input type="checkbox"/> October 15   |
| <input type="checkbox"/> July 23   | <input type="checkbox"/> November 19  |
| <input type="checkbox"/> August 20 | <input type="checkbox"/> December 17  |

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_