

Volunteer Center of Greater Milwaukee
Registration Form
A Service of the Nonprofit Center

Date _____

Last Name: _____		First Name _____	
Address: _____			
City: _____	State: _____	Zip: _____	Email: _____
Daytime Phone: _____		Evening Phone: _____	
Are you on our At-the-Center newsletter mailing list? <input type="checkbox"/> Yes <input type="checkbox"/> No Would you like to be? <input type="checkbox"/> Yes <input type="checkbox"/> No			
How did you hear about the Volunteer Center? _____			

The following questions are optional, but helpful for United Way statistical purposes:

Have you volunteered before? Yes No

Gender: Male Female

What is your ethnicity? African American Asian American Caucasian Latino
 Multiracial Native American Other _____

Age: 6-12 13-17 18-34 35-54 55-64 65-74 75-84 85 and over

If you are 13-17, what is your exact age? _____

Income Level: \$0-\$12,000 \$12,000-\$15,000 \$15,000-\$25,000 \$25,000-\$50,000

Searching for a Volunteer Opportunity

I am looking for: <input type="checkbox"/> Ongoing Opportunity <input type="checkbox"/> Short Term Opportunity <input type="checkbox"/> One Time Opportunity
I Am Available: <input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings

I Am: <input type="checkbox"/> Teen (17 and under)	<input type="checkbox"/> Adult (18+)	<input type="checkbox"/> Family
<input type="checkbox"/> Small Group (2-9)	<input type="checkbox"/> Large Group (10+)	<input type="checkbox"/> Referred By The Court
<input type="checkbox"/> Physically Limited	<input type="checkbox"/> Cognitively Limited	<input type="checkbox"/> Limited To Bus Transportation
<input type="checkbox"/> Volunteer From Home		

(Over)

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<p>I want to help this group:</p> <p><input type="checkbox"/> Children</p> <p><input type="checkbox"/> Teens</p> <p><input type="checkbox"/> Adults</p> <p><input type="checkbox"/> Older Adults</p> <p><input type="checkbox"/> Families</p> <p><input type="checkbox"/> People With Disabilities</p>	<p>I want to help this cause:</p> <p><input type="checkbox"/> Abuse</p> <p><input type="checkbox"/> Education Or Literacy</p> <p><input type="checkbox"/> Hunger</p> <p><input type="checkbox"/> Housing Or Homeless</p> <p><input type="checkbox"/> LGBT</p>	<p><input type="checkbox"/> Civic Or Social Action</p> <p><input type="checkbox"/> Environment</p> <p><input type="checkbox"/> Health Issues</p> <p><input type="checkbox"/> Immigration Or Refugees</p>
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I have an interest in this activity or skill:		
<p><input type="checkbox"/> Animals</p> <p><input type="checkbox"/> Care Giving</p> <p><input type="checkbox"/> Disaster Or Emergency</p> <p><input type="checkbox"/> Fund Development Or Financial</p> <p><input type="checkbox"/> Maintenance Or Repair</p> <p><input type="checkbox"/> Short-term Project</p> <p><input type="checkbox"/> Sports Or Recreation</p> <p><input type="checkbox"/> Transportation Or Errands</p>	<p><input type="checkbox"/> Arts & Culture</p> <p><input type="checkbox"/> Clean Up Or Nature</p> <p><input type="checkbox"/> Employment</p> <p><input type="checkbox"/> Gift Shop Or Concessions</p> <p><input type="checkbox"/> Mentoring</p> <p><input type="checkbox"/> Social Or Craft Activities</p> <p><input type="checkbox"/> Supply Drive</p> <p><input type="checkbox"/> Tutor Or Classroom Assistant</p>	<p><input type="checkbox"/> Board Or Committee Service</p> <p><input type="checkbox"/> Counseling</p> <p><input type="checkbox"/> Food Or Meals</p> <p><input type="checkbox"/> Legal Or Advocacy</p> <p><input type="checkbox"/> Office Or Clerical</p> <p><input type="checkbox"/> Special Events</p> <p><input type="checkbox"/> Technical Or Professional</p>

Return this form to: Volunteer Center of Greater Milwaukee
 A Service of the Nonprofit Center
 2819 W. Highland Blvd.
 Milwaukee, WI 53208
 (414) 273-7887



Or e-mail it to opportunities@volunteermilwaukee.org

Office Use Only		
<u>Referrals:</u>		
Agency _____	Opportunity _____	Referral Date _____
Agency _____	Opportunity _____	Referral Date _____
Agency _____	Opportunity _____	Referral Date _____
Agency _____	Opportunity _____	Referral Date _____
Agency _____	Opportunity _____	Referral Date _____