



# CHURCH OUT SERVING

83 Sydenham Street, Simcoe, ON N3Y 1R8

## VOLUNTEER APPLICATION

Please mail completed form to address above, or email to [churchoutserving@gmail.com](mailto:churchoutserving@gmail.com).

|          |              |                |
|----------|--------------|----------------|
| Name:    |              | Date:          |
| Address: |              | Home Phone:    |
| Town:    | Postal Code: | Cell Phone:    |
| Email:   |              | Date of Birth: |

How did you hear about Church Out Serving? Please check all that apply:

|  |  |                                   |
|--|--|-----------------------------------|
| <input type="checkbox"/> A Church Out Serving Volunteer or Project | <input type="checkbox"/> Website       | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> Agency: _____                             | <input type="checkbox"/> Church: _____ |                                   |
| <input type="checkbox"/> Friend/Relative: _____                    | <input type="checkbox"/> Other: _____  |                                   |

Which Church Out Serving Project(s) do you wish to serve in? Please check all that apply:

|   |   |   |                                       |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Celebrate Recovery         | <input type="checkbox"/> Donation Station   | <input type="checkbox"/> First Serving Dinners  | <input type="checkbox"/> Riversyde 83 |
| <input type="checkbox"/> The Gathering Food Gardens | <input type="checkbox"/> H2O Prayer         | <input type="checkbox"/> Emergency Meal Program |                                       |
| <input type="checkbox"/> We Believe in Simcoe       | <input type="checkbox"/> COS Administration | <input type="checkbox"/> Other: _____           |                                       |

Indicate your skills and interests. Please check all that apply:

|   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Arts and Crafts          | <input type="checkbox"/> Electrical     | <input type="checkbox"/> Event Planning     | <input type="checkbox"/> General Repair/Maintenance |
| <input type="checkbox"/> Photography              | <input type="checkbox"/> Construction   | <input type="checkbox"/> Drywall            | <input type="checkbox"/> Clerical/Administrative    |
| <input type="checkbox"/> Audio/Video/Sound        | <input type="checkbox"/> Moving Service | <input type="checkbox"/> Fund Raising       | <input type="checkbox"/> Transportation/Delivery    |
| <input type="checkbox"/> Cleaning/Janitorial      | <input type="checkbox"/> Gardening      | <input type="checkbox"/> Landscaping        | <input type="checkbox"/> Governance/Management      |
| <input type="checkbox"/> Food/Culinary Skills     | <input type="checkbox"/> Music          | <input type="checkbox"/> Painting           | <input type="checkbox"/> Promotion/Marketing        |
| <input type="checkbox"/> People/Relational Skills | <input type="checkbox"/> Plumbing       | <input type="checkbox"/> Décor              | <input type="checkbox"/> Writing Proposals/Reports  |
| <input type="checkbox"/> Computer/Website         | <input type="checkbox"/> Prayer         | <input type="checkbox"/> Tutoring/Mentoring | <input type="checkbox"/> First Aid/CPR              |

Describe any other skills or interests you have:

Describe any education or training you have:

Describe any work or volunteer experience you have:

When are you available:

Share three things about yourself, that will help us get to know you better:

- 1.
- 2.
- 3.

Why would you like to volunteer with Church Out Serving?

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|---|------------------|
| Thank you for your interest in volunteering. Please note that all information you provide will be used for the sole purpose of volunteering and communications at Church Out Serving. | Signature: _____ |
|---|------------------|