Clara's Hope

every child deserves a family

Volunteer Application

CLARA'S HOPE NORTHWEST

Date of Application:

First, Middle, Last Name:_____

Date of Birth: _____ Maiden/Previous Names: _____

Address:_____

Street City State Zip Code. Phone (.)_____Email:_____

What is your preferred method of contact? Phone, Text, Email

Names/Ages of Children:_____

Occupation: _____ Employer: _____

Do you have any limitations or conditions preventing you from certain types of activities? Y N
If yes, please explain:

Do you have experience with foster care and/or adoption? Y N
If yes, please explain (including dates):

Why are you interested in volunteering with Clara's Hope?

Please select all areas of interest:

❏ Meals ❏ Transportation ❏ Services: cleaning, laundry, lawn care, house maintenance, car care	❏ Child Care ❏ Respite (overnight child care) ❏ Tutoring ❏ Mentoring	❏ Intercessory prayer ❏ Encouragement ❏ Family Fun Night ❏ Large Events ❏ Fundraising ❏ Social Media/ Marketing ❏ Business Networking