

## Volunteer Profile

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

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

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

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Best time / method of contact: \_\_\_\_\_

Availability (days & times): \_\_\_\_\_

Employer: \_\_\_\_\_

Does your employer or your spouse's employer (if applicable) offer a matching gifts program?

Does your company participate in corporate sponsorship programs for non-profit organizations?

Areas of Interest (check as many as apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Leadership Committee | <input type="checkbox"/> Corporate Sponsorships      |
| <input type="checkbox"/> GREAT STRIDES walk   | <input type="checkbox"/> <i>Breath of Life</i> Gala  |
| <input type="checkbox"/> Golf Events          | <input type="checkbox"/> <i>Curefinders</i>          |
| <input type="checkbox"/> Major Gifts Campaign | <input type="checkbox"/> Young Professionals' Events |
| <input type="checkbox"/> Other: _____         |  |

What type of activities are you most interested in performing? (Check all that apply.)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Chair / Co-chair | <input type="checkbox"/> Secure auction items | <input type="checkbox"/> Day of event support  |
| <input type="checkbox"/> Committee member | <input type="checkbox"/> Logistics            | <input type="checkbox"/> Publicity             |
| <input type="checkbox"/> Fundraising      | <input type="checkbox"/> Table/ticket sales   | <input type="checkbox"/> Volunteer recruitment |
| <input type="checkbox"/> Office work      | <input type="checkbox"/> Internship           |  |



### Greater New York - Long Island Chapter

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