



Martin Volunteers and RSVP

50 Kindred Street, Suite 207 ~ P.O. Box 362 ~ Stuart, FL 34995
Phone: (772) 220-4472 ~ Fax: : (772) 220-7771 ~ Web:www.martinvolunteers.org

Martin Volunteers is a program of United Way of Martin County

Today's date _____

Name (Please print clearly!): _____

Street Address: _____

City, State, ZIP: _____

Home phone _____ Work phone _____ Cell phone _____

E-mail _____ Neighborhood/Subdivision _____

Emergency contact: Name _____
LAST NAME FIRST NAME

Relationship _____ Phone: _____

Current or previous occupation (if retired) _____

- I understand that I am not an employee of Martin Volunteers/RSVP, the sponsor, the volunteer station, or the federal government and agree to serve without compensation.
- I understand that if I use my personal automobile to drive to and from my volunteer workstation, I will keep in effect automobile liability insurance equal to or greater than the minimum required by the state.

Signature of volunteer _____ Date _____ Signature of Martin Volunteers staff _____

Driver's license # _____ State _____

The following information is important in support of grants and government funding:

Ethnicity: ___ American Indian or Alaskan Native ___ Native Hawaiian or Pacific Islander
___ Black or African American (Hispanic) ___ Black or African American (Non-Hispanic)
___ Asian ___ White (Hispanic) ___ White (Non-Hispanic) ___ Other

Date of birth _____ Gender: M ___ F ___

Volunteers 55 & older: Complete this information for free RSVP Supplemental Accident Insurance:

Beneficiary: Name _____

Relationship _____ Phone: _____

How did you hear about Martin Volunteers? _____

I wish to receive newsletters and information from Martin Volunteers and United Way of Martin County: Yes No

I grant full permission for Martin Volunteers to use photographs or video footage of me in legitimate accounts and promotions. Yes No

Volunteer Interest Survey: Important for matching you to a volunteer opportunity

Note: Some agencies may require a background check prior to assigning a volunteer.

Please tell us about any limitations you have that may affect volunteer placement (such as physical, language, time restrictions, etc.): _____

Please check specific types of volunteer activities that interest you. Key impact areas are bolded

- Animal care
- Art
- Board or committee member
- Bookkeeper
- Carpenter/handyman
- Child advocate
- Child care
- Children's shelter
- Clerical
- Crime prevention/public safety
- Data entry
- Computer programming
- Disaster services**
- Domestic violence advocate
- Driver
- Education**
- Elder care
- Entertainer
- Environment**
- Food pantry
- Friendly visitor
- Fund-raising
- Gardening/yard care
- Grant writing
- Health care services
- Health/Nutrition**
- Helping people with disabilities
- In-home care/hospice

- Library services
- Literacy/ESL tutor**
- Meal delivery
- Marketing/PR/newsletters/Web
- Mentor/tutor
- Neighborhood Watch
- Nursing home/assisted living facility
- Receptionist
- Respite care provider
- Recreation
- School Supplies Program
- Seamstress
- Speaker/trainer
- Super Stuffer
- Tax Assistance**
- Teacher aide
- Theater usher/museum docent
- Thrift shop worker
- Translator
Language(s) _____
- Volunteer coordinator/recruiter
- White Doves Holiday Project**

On-Call Volunteers
 We would contact you when receiving requests from local nonprofit agencies that are looking for one-time or short-term assistance with special events or fund-raising

=====FOR OFFICE USE ONLY=====

Agency name _____ Job Description _____

Agency name _____ Job Description _____

Agency name _____ Job Description _____

Agency name _____ Job Description _____

Agency name _____ Job Description _____

Entered: ___/___/___ by _____

Welcome letter sent: ___/___/___