

Freehold Area Open Door Volunteer Application

First Name _____ Last Name _____

Address _____

Town _____ Zip _____ Are you over 18 years of age? Yes

Mobile _____ Receive text messages? Yes

E-mail _____

How did you learn about Open Door?

Days and hours you are available _____
(M-F 10-12 or 12-2)

Do you come to Open Door for food? yes no

Do you speak Spanish? yes no

I would like to work in:

Pantry Back area only (9-12) After School Program

Pick up bread and produce:

Do you have a: _____ truck _____ van _____ station wagon?

Describe your previous volunteer and/or work activities _____

Are you here for community service? Yes No For school Other

What special skills do you have that might benefit Open Door?

Emergency Contact Name _____ Phone _____

Signature _____ Date _____

Under 18 Signature of Parent/Guardian _____ Date _____