# **Volunteer Request Form**

Name of Organization: _____

Name of Event: _____

Date of Event: _____

Nature of Volunteering Opportunity: _____

_____

_____

_____

_____

_____

_____

_____

Expectations from Organization from Volunteer: _____

_____

_____

_____

_____

_____

_____

_____

_____

Qualification and/or Certifications needed by the Volunteer:_____

_____

_____

_____

_____

**Please complete the form and return it to Volunity Coordinators** *at minimum two weeks*
**prior to volunteering date to volunitywilmot@gmail.com. Thank you.**