

# Volunteer Information Form

Date: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation/ Job Title: \_\_\_\_\_

Are you a member of a Host or Support Congregation in our Network? ( ) Yes ( ) No

If Yes, which one? \_\_\_\_\_ Town? \_\_\_\_\_

Special Talents and Skills, i.e., organizational skills, listening skills, musical ability, etc.

( ) I would consider working on a committee: CIRCLE ONE  
Housing/Strategic Planning, Human Resources, Finance, Events/Fundraisers

( ) I would consider being developed for a future leadership role on the Board.

( ) I would like to make a yearly difference with a pledge of \_\_\_\_\_.

( ) Please call me for my credit or debit card information

( ) Check ( ) Cash ( ) Please bill me

( ) Not at this time, but please keep me updated in your quarterly mailings.

Family Promise of Cape May County  
P.O. Box 200  
Cape May Court House, NJ 08210

\*Family Promise is a 501 (c) 3 organization. All donations are tax-deductible.