

VOLUNTEER APPLICATION FOR AN INDIVIDUAL

Name: _____ Adult or Child? _____ If child, age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (home) _____ (work) _____ (cellular) _____

Email: _____

The best way to contact you is: _____

Volunteer Interests and Availability

Is there a particular type of volunteer work or program activity in which you are interested?

- Block Captain for Project Blitz
- Friends of Lake Louie to help care for this garden at highway 40 & 20th Street/Chestnut exit
- Downtown Planting around City Hall
- Highway Daffodil Planting
- Greenhouse Planting Projects (____ Seeding ____ Window Boxes ____ Hanging Baskets)
- Office Assistance
- Other, Please specify your interest _____
If other, what dates and hours do you wish to work? _____

Are you looking to work on a particular date or dates? If so, please specify _____

At what times are you interested in volunteering?

- Weekdays [] Mornings [] Midday [] Afternoons
- Weekends [] Saturday [] Sunday
- Flexible

Do you have a certain number of hours you wish to work? _____

Mail this form to Operation Brightside, 4646 Shenandoah Avenue, St. Louis, MO 63110 or fax to 772-7444
or e-mail to operation.brightside@gmail.com