HERO Group
Volunteer Information

HERO requests a months notice prior to volunteer date

Date _____

Name/Business/Agency/School _____

Address _____ **City/State/Zip** _____ / _____ / _____

Contact Person _____ **Phone Number** _____

E-mail _____

Total Number of people volunteering (HERO can accommodate a total of 5-7 at a time) _____

*If you have a group larger than 7, HERO can make accommodations. We will advise your group to be split into different days.

Hours required to complete (if applicable) _____

Date(s) Requesting : _____

Hours Available _____

Mark the activities below you are interested in volunteering with:

- ☐ Sorting Donations
- ☐ Donation Pick Ups
- ☐ Organizing/General Cleaning
- ☐ Equipment Maintenance/Repair
- ☐ Carpentry, Painting, etc...
- ☐ Loading Trucks
- ☐ Retail/Customer Service
- ☐ Office Work/Data Entry
- ☐ Mailings
- ☐ Development
- ☐ Website/ Social Media
- ☐ Special Events
- ☐ Other _____

Why would you like to volunteer at HERO?

How did you hear about volunteering at HERO?

_____

I certify the above information is true, to the best of my knowledge.

Signature _____ **Date** _____