



VOLUNTEER APPLICATION FORM

6 Southwood Park Drive
Hilton Head Island, SC 29926

PLEASE PRINT

NAME _____ DATE _____

ADDRESS _____ ZIP CODE _____

PHONE (H) _____ (C) _____

EMAIL _____

DAYS AVAILABLE (CIRCLE) TUES WED THURS FRI SAT

TIME OF DAY(CIRCLE) MORNING AFTERNOON

EMERGENCY CONTACT _____

PHONE _____ RELATIONSHIP _____

Medical Conditions

PREFERRED WORK AREA(S):

ACCESSORIES _____ BOOKS _____ CASHIER _____ ELECTRONICS _____

HOUSEWARES _____ FURNITURE _____ JEWELRY _____

CLOTHING (SORTING, PRICING & SALES FLOOR)

Please notify the office if any of the above information changes

Thank you for supporting our mission and helping serve our community!