

VOLUNTEER FORM TO RETURN TO DISTRICT OFFICE

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE AND E-MAIL \_\_\_\_\_

PREFERRED WORK AREA AND TIME \_\_\_\_\_

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NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE AND E-MAIL \_\_\_\_\_

PREFERRED WORK AREA & TIME YOU CAN WORK \_\_\_\_\_

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NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE & E-MAIL \_\_\_\_\_

PREFERRED WORK AREA & TIME \_\_\_\_\_

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Each volunteer should fill out a form and return to Shenandoah District Office,  
PO Box 67, Weyers Cave, VA 24486.

Church representative may send all in together if easier. This should be at the  
District Office, no later than April 30. Please make copies as needed.