VOLUNTEER FORM

Date:	

(ALL INFORMATION IS KEPT STRICTLY CONFIDENTIAL)

Ple	EASE CHECK ALL THAT APPLY: (Office Volunteer - Phone Army -	12 Stepper		
First Name:	Last Name:				
Address:					
City:		Zip:			
Phone:	Alternate Phone: _	Email:			
Sobriety Dat	te: Home Group:	Male	- Female		
Office Vo					
Work 4 ho Sat)]	our shift at Desk in Office [AM ((9A-1P); OR , PM (1P-5P) Mon-Fri; O l	R , AM (9A-1P) on		
General Office Help: fold High n' Dry, Inventory, and Cleaning					
Archives;	help collect, restore and protect	t local AA History			
Phone Arr	ny: * Requires 1 year MINIMU	IM sobriety			
Answer phones and pass information to 12 Step Volunteers					
(6A-9A OR 5	5P-10P OR 10P-6A Sun thru Sa	t; 1P-5P Sat OR Sun; 9A-1P on Sun)			
12 Stepper	r:				
Check all acti	vities you would be willing to do t	o help a fellow alcoholic. List available ti	mes in table below.		
Make a	n phone call				
Make a home/hospital visit					
Give a ride to a meeting					
Give a ride to Detox					
Days & Hours Available: (List hours available, specify AM or PM, for each)					
	Office Vol. (Circle AM or PM time slot)	Phone Army (Circle time slot)	12 Stepper (List Times)		
Sunday		(6A-9A); (9A-1P); (1P-5P); (5P-10P); (10P-6A)			
Monday	AM or PM	(6A-9A); (5P-10P); (10P-6A)			

	Office Vol. (Circle AM or PM time slot)	Phone Army (Circle time slot)	12 Stepper (List Times)
Sunday		(6A-9A); (9A-1P); (1P-5P); (5P-10P); (10P-6A)	
Monday	AM or PM	(6A-9A); (5P-10P); (10P-6A)	
Tuesday	AM or PM	(6A-9A); (5P-10P); (10P-6A)	
Wednesday	AM or PM	(6A-9A); (5P-10P); (10P-6A)	
Thursday	AM or PM	(6A-9A); (5P-10P); (10P-6A)	
Friday	AM or PM	(6A–9A); (5P-10P); (10P-6A)	
Saturday	АМ	(6A–9A); (1P-5P); (5P-10P); (10P-6A)	

Any Restrictions? or Any Comments? (use other side as necessary)