



Volunteer Interest Form

Name _____ Date _____

Street _____

City _____ Zip _____

Telephone (Home) _____ Cell _____

Email Address _____ Birthday _____ month/day

Preferred contact method (text, email, phone): _____

Select your level of interest in Angels with a Mission, Inc.:

_____ Member: Participate in monthly activities on the 3rd Saturday.

_____ Volunteer: Assist a few times per year with various projects.

_____ Donor: Commit to making a financial donation to the agency for various projects.

If you are interested in being a member or a volunteer please select one committee you would like to assist with:

_____ Social/Media

_____ Program/Events

_____ Fundraising

_____ New Member/Volunteer

I prefer to attend morning, afternoon or evening events? _____

Are you currently volunteering with another organization? Yes ___ No ___ If yes please list the agency.

How did you hear about AWAM? Current Member: _____ Facebook _____ Website _____

Specialized Skills (i.e. web development, graphic design, photography, etc.): _____

Signature

Date

For more information about **Angels with a Mission**, please visit our website at www.angelswithamission.net or contact us directly at 832-930-1822.