

# Volunteer Registration Form

2009-2010 School Year

Have you volunteered for JA previously?  Yes  No

**You may attach a business card for work info., in case of job location change, please provide home info.**

Name (include Mr./Ms. etc.):

Employer:

Job Title:

Work Mailing Address (no PO Boxes):

City:

State:

Zip:

Work Phone:

Work Fax:

Work E-mail:

Home Address:

City:

State:

Zip:

Alt. Phone:

Home E-mail:

**Ethnicity – being collected by JA Worldwide, per funder request.**

African American  American Indian  Asian  Caucasian  Hispanic  Hawaiian  Alaskan Native  
 Other: \_\_\_\_\_  Prefer not to answer

**Address preference:**

Work

Home

**Time of year preference:**

Fall (Oct. – Dec. 09)

Spring (Jan. – Jun. 10)

No Preference

**Student age preference:**

3<sup>rd</sup> Grade

4<sup>th</sup> Grade

5<sup>th</sup> Grade

6<sup>th</sup> Grade

**If you have a School, Teacher, Grade or City of preference, indicate below:**

I have a friend/colleague who would like to participate?

**(Please give name and phone or e-mail)**

If you would like a letter of acknowledgement to be sent, please supply your CEO or Supervisor's name and address:

Other:

**OFFICE USE ONLY**

Region Code:

Date:

Training :  Already Trained

TBD

Date/Place :

Materials :  Has Materials

Date:  Send Materials

Receive Materials at Training

No Letter

Signed Volunteer Conduct Form

Let Their Success Be Your Inspiration!<sup>SM</sup>

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