



Availability Sheet / Anchorage Program

PRINT NAME: _____

EMAIL: _____

CELL PHONE: _____

ADDRESS: _____

EMERGENCY CONTACT (NAME, RELATIONSHIP AND PHONE NUMBER):

CIRCLE DAYS YOU ARE ABLE TO VOLUNTEER:

MONDAY / TUESDAY / WEDNESDAY / THURSDAY / FRIDAY

- Email will be the primary method of communication for the Anchorage Program.
- Your information will be forwarded to the team leader on the days you have expressed an interest working. You will be pulled into the schedule by the team leaders and contacted by them.
- There is additional paperwork to be completed. It is your responsibility to get that done and handed in to the Program Director.

Thank you for volunteering!