

Rockford Rescue Mission Group Application

Please print clearly

Group Name _____

What type of group? Business Organization School Church Family Other (_____)

Address _____
(Street) (City) (State) (Zip)

Phone _____ Email _____ Website _____

Total Number of People _____ Men Women Youth/Children
Total Number of Youth (12–17 yrs.) _____ Total Number of Children (under 12 yrs.) _____

Group Leader Name _____
(First) (Middle initial) (Last)

Address _____
(Street) (City) (State) (Zip)

Phone _____ Alternative Phone _____ Email _____

Special skills/training that your group possesses _____

Previous volunteer experience your group has had _____

Is this a one-time volunteer experience? Yes No (Please answer the next 2 questions)

How often would your group like to volunteer? Weekly Monthly As Needed Other (_____)

Areas of interest to your group? Chapel (Signed Statement of Faith Required) Clinic (Medical Only)

Crisis – Special Activity Facilities – Landscaping Facilities – Special Projects Food Services – Food Prep

Food Services – Special Projects Holiday Meals Life Recovery – Special Activity Thrift Store – Donation

Sorting Thrift Store – Special Projects Volunteer area - Donation Sorting Other (_____)

How did you first learn about volunteering with Rockford Rescue Mission? Church/School Media/Internet

Walk-in Referring Agency Current Donor Volunteer/Staff (_____)

What does your group know about RRM? _____

Documents for Group Members (must be received and processed prior to serving.)

1. All adult must complete the Authorization/Agreement form. Form is only required once.
2. All minor children must be 'named' on their parent/guardian's form OR a separate form must be filled out.
3. Should group leadership change, the new leadership information must be given to the Volunteer Coordinator as soon as possible.

I certify that the information contained in this application is true and correct and has been given voluntarily. My signature, as the group leader, indicates the consent of the entire group to abide by the standards of the Rockford Rescue and I take responsibility for each member's compliance with the standards.

Group Leader's Signature _____ Date _____