



## MEALS ON WHEELS APPLICATION FOR VOLUNTEERS

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ cell phone \_\_\_\_\_

Email \_\_\_\_\_

Day(s) you are available to drive regularly M \_\_\_ T \_\_\_ W \_\_\_ Th \_\_\_ F \_\_\_

Are you willing to be on the substitute list? Yes \_\_\_ No \_\_\_

If yes, on which days? M \_\_\_ T \_\_\_ W \_\_\_ Th \_\_\_ F \_\_\_

How often can you drive? Weekly \_\_\_ Bi-weekly \_\_\_ Monthly \_\_\_

Are you willing to drive in winter weather? Yes \_\_\_ No \_\_\_

Do you have a 4-wheel drive vehicle? Yes \_\_\_ No \_\_\_

Please supply the name and telephone number of a reference who is not a family member:

Name \_\_\_\_\_

Phone \_\_\_\_\_

OPTIONAL: Are you a member of a local congregation? Yes \_\_\_ No \_\_\_

If so, which one? \_\_\_\_\_

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### VOLUNTEER WAIVER FORM

The undersigned hereby agrees to voluntarily help in the delivery of meals (and/or other services) to homebound individuals accepted for such service by Guilford Interfaith Ministries, Inc. I agree to provide my own transportation in making such deliveries (and related services) and agree to obtain my own automobile insurance, hereby agreeing to waive and release Guilford Interfaith Ministries, Inc. from any claims arising from my activities in delivering such meals and services.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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