

GOD'S FOOD BANK

VOLUNTEER INFORMATION

NAME _____ DATE _____

ADDRESS _____

PHONE # _____

EMAIL _____

EMERGENCY CONTACT

NAME _____ PHONE _____

RELATIONSHIP _____

Do you have any physical problems that we should be aware of?

What days and hours are you available to work?

How did you find out about volunteering at God's Food Bank?

Please circle the jobs that you would be willing to do:

Food Room

Restocking

Bag Preparation

Computer

Food Distribution

Truck Unloading