

Executive Director Signature _____ Date _____

Do Not Write in this Space -Office Use Only



RSVP Volunteer Registration Form
Mesa County RSVP, Inc. • P.O. Box 1077 • Grand Junction, CO 81502
Phone: (970) 243-9839 • FAX: (970) 245-4808

(PLEASE PRINT)

(Today's Date) _____

NAME _____

ADDRESS _____
(Street) (City, State) (Zip)

E-MAIL ADDRESS _____

PHONE _____ BIRTH DATE _____ MALE _____ FEMALE _____

Check the appropriate boxes regarding race and marital status (Optional)

- White Black Hispanic Asian/Pacific Islander American Indian/Alaskan Native
 Married Widowed Single Divorced

Are you a veteran? Yes No Branch of Service _____ Which War? _____

Transportation Information: (Please complete the following)

- Do you wish to work within walking distance? Yes Not necessary
Will you drive to and from your assignment? Yes No
Do you need to be reimbursed for mileage? Yes No

RSVP Accident and Liability Insurance requires a valid driver's license and liability insurance to be in effect:

Drivers License Number: _____
(State) (Number)

Auto Insurance Coverage with _____

Who would you like us to notify in case of an emergency?

(Name) (Address) (City/State/Zip) (Phone)

What was/is your main occupation? _____ Company Name: _____

Do you speak a foreign language? Yes No If so, what language _____

List any conditions (physical or other) which may limit your assignment _____

- Need Sit-Down Work Cannot Climb Stairs Cannot Lift

Have you registered with RSVP before? _____

How did you find out about RSVP? _____

Name of person referring, if applicable _____

Are you currently volunteering? Yes No If yes, where and job title _____

(OVER)

Identify your particular areas of interest:

- Services to Youth
- School Volunteer
- Food Distribution
- Crime Prevention
- Literacy/Libraries
- Office Work
- Driving
- Senior Programs
- Arts and Crafts
- Hospice
- Environment, Parks
- Support Groups
- Committees
- Emergency Preparedness

- One Time Projects
- Handyman Project
- Business Development
- Mental Health Programs
- Computers/ Data Entry
- Animal Care/Animal Shelters
- Nursing Homes/Assisted Living Facilities
- Community Information/Betterment
- Hospitals/Health Delivery
- Aid to Needy
- Museums, Art, Music, Theater
- Services to the Disabled
- Advisory Councils/Board of Directors
- Other _____

List any skills, training, talents or hobbies you have you feel would be helpful in your volunteer work. Include areas of expertise or special interests: _____

Other volunteer activities you have been involved in: _____

Please read, complete and sign in order to assign benefits from the insurance policy:

I have completed the full RSVP registration form and will volunteer my services through the Mesa County Retired & Senior Volunteer Program, Inc., (RSVP). I understand that I am not an employee of RSVP. It is also understood that if I use my personal automobile in any of my volunteer assignments, I will arrange and keep in effect a valid driver's license and automobile insurance equal to the minimum as required by Colorado State law. I also designate as beneficiary of my RSVP accidental death insurance the following:

Beneficiary Name (Full Legal Name)

Relationship to You (son, daughter, other)

Beneficiary Address (Include City, State & Zip)

Primary Phone # Home Cell Work

Printed Name of Volunteer

Secondary Phone # Home Cell Work

Signature of Volunteer

Date Signed

Photo Release Form:

I hereby grant Mesa County RSVP, Inc. permission to use my likeness in photograph(s)/video in any and all of its publications or on the world wide web, whether now known or hereafter existing, controlled by Mesa County RSVP, Inc., in perpetuity. I will make no monetary or other claim against Mesa County RSVP, Inc. for the use of the photograph(s)/video.

Or: ***I do not*** give my permission to use my likeness in photograph(s)/video to Mesa County RSVP, Inc.

Signature _____