

# **Volunteer Application**

Availability (please circle all that apply)

405 North Avenue PO Box 530 East Berlin PA 17316 717-259-8848 www.ebacc.org	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	Morning						
	Afternoon						
	Evening						

<b>Contact Information</b>							
Name		Municipality/Township					
AddressStreet		City	State	Zip Code			
Phone							
Date of Birth							
Person to Notify in Case	of Emergency						
Name		Relationship					
Phone		Alternate#					
Interests (tell us in which	n areas you are interested in volu	nteering)					
Events	Sorting Rooms	Garden Tour	Donation Center	er			
<ul> <li>Fall Festival, Bi Yard Sale,etc.</li> </ul>	iggest 🛛 🗆 Clearance Sales	Teas	Other				
Tata Sale, etc.	Book Sales	Garden/Lawn					

## Christmas Bazaar Please complete the back side of this form if applicable

□ Book Sales

Seasonal Shoppes

Agreement and Signature By submitting this application, I affirm that the facts set forth in it are true an volunteer, any false statements, omissions, or other misrepresentations mad immediate dismissal.		
Name Printed.	-	
Signature	-	Date

Work

□ Kitchen

#### **Our Policy**

□ Yard Sale Setup & Tear

Down

Thrift Shoppe

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us. We reward our volunteers with a \$5 birthday coupon to be redeemed at our Thrift shoppe, Indoor Yard Sale, Seasonal Shoppe or Book Sales!

### Special Skills or Qualifications

Summarize special skills or qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

#### Accommodations

EBACC is committed to providing access, equal opportunity and reasonable accommodation for individuals with disabilities in employment, its services, programs, and activities. This is an area to share with us if you require accommodation for specific duties. If applicable, please share any allergies or medical conditions as well. (This field is optional)