C2C prioritizes volunteers who live in Whatcom or Skagit Counties and are interested in volunteering with us long-term. We encourage applicants who are available and open to learning.



## Community to Community Development Volunteer Registration Form

Date:

PERSONAL INFORMATION:		
Your first name:	_ Middle initial: Last	name:
Address:		
City, State:	Zip Code:	Date of Birth:
Registered Voter (circle one) Yes/No	Over 18yrs old? Yes/No	Are you a student? Yes/No
Language(s) spoken:		Gender Pronouns:
Phone Number:		
E-Mail Address:		
Best Way to Reach You? TEXT CALL	EMAIL FACEBOOK (	circle any that apply)
How did you come to C2C?		

Are you looking to get credit for school through volunteering with C2C? (circle one) Yes/No

Are you able and willing to participate in direct actions like going to a picket line or rally? Yes/No

Do you have (circle all that apply):

- Driver's License
- Reliable Vehicle
- Food Handlers Permit
- CPR Training
- Anti-Oppression/ Undoing Racism Training or Experience
- Interest/ Ability to do Physical Work (ie support us with lifting/moving heavy things, work parties)

to be aware of?	odate volunteers of all abilit	ties. Do you have any access needs that we need
	tended to get to know you k ning you as close as we can t	better to try and make your experience here at to the pieces of our work that will inspire you.
What drives or motivat	es you in your life?	
How do you identify yo	ourself in your community?	
Can you describe how	involved you are in your cor	mmunity? Please provide examples.
		<del></del>
What has been your ex	operience working with peop	ole different from yourself?
	loyed? If so, please provide	information below:
Employer:	Dates Worked: Sta	art: End:
Supervisor:	Phone #:	Position:
Job Duties/ Responsib	ilities:	

Are you interested in participating in and supporting logistics for C2C related events? (circle one) Yes/No

Are you interested in consistent and long-term volunteering with C2C? Yes/No

AVAILABILITY:
Available from to
Monday: # Hours - from to
Tuesday: # Hours - from to
Wednesday:# Hours - from to
Thursday: # Hours - from to
Friday: # Hours - from to
Saturday:# Hours - from to
Sunday: # Hours - from to
All information will be for internal use only and be kept confidential.
Volunteer Signature: Date:
Thank you for taking the time to fill this out! Here's what happens next:
<ul> <li>You will hear from us soon, via email, to let you know that we have received your application.</li> <li>If your interests and skills match what we are looking for, we will schedule a time for you to meet with us to start the process of getting you involved.</li> </ul>
C2C email list for alerts and updates: please note that we will add you to the C2C general email list unless you opt out here:
NO, please do not add me to the C2C's email list.