

# RSVP

121 West Court Street, Ithaca, NY 14850  
Telephone: (607) 273-1511

Date: \_\_\_\_\_

## Volunteer Registration Form

Please complete all the segments on both sides of this form.

Mr. Mrs.  
Ms. Miss \_\_\_\_\_ e-mail: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Mailing \_\_\_\_\_ Town in which you reside: \_\_\_\_\_  
Address: \_\_\_\_\_  
(Street) (City/Town) (State/Zip)  
Date of Birth: \_\_\_\_\_ Please check \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed  
Do you drive? \_\_\_\_\_ Yes \_\_\_\_\_ No Do you have a car? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Driver's License Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_  
Health Restrictions: \_\_\_\_\_  
Education/Training: \_\_\_\_\_  
Last Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Previous RSVP volunteer experience(s): \_\_\_\_\_  
Current Volunteer Placement: \_\_\_\_\_

## **Please Check All Areas of Interest**

<u>Children</u> preferred age group _____, tutor: ESL, mentor; classroom; school library	<u>Drivers/escorts</u> Gadabout; FISH (own car for medical appointments); meal delivery
<u>Clerical/reception assistance</u> Computer entry; typing; filing	<u>Emergency Response</u> Red Cross
<u>Counseling</u> tax; health insurance; substance abuse; crisis intervention; small business	<u>Entertainment/ theatre</u> performer; sets; costumes; usher
<u>Crafts/Sewing</u>	<u>Food service</u> Meal preparation; serving; dishwashing; delivery
<u>Disabled, working with</u> mental/emotional; physical	<u>Health</u> blood pressure clinics; bloodmobiles; Hospicare; hospitals; flu clinics
<u>Languages</u>	<u>Telephoning</u>

		Surveys; data collection, transportation coordination
	<u>Library Work</u> Book repair; cataloging/sorting	<u>Visiting homebound/long-term care</u>
	<u>Maintenance/building skills</u> Carpentry; electrical; plumbing; ground work	<u>Work groups</u> Bulk mailings and projects
	<u>Management/ administration</u> Community board; consulting; program coordination, <b>RSVP Advisory Council</b>	<u>Writing editing</u> newsletters; reports; scripts; news releases
	<u>Museum assistance</u> art, historical, science, information desk; tour guide; archive/ special collection	<u>Teaching</u> area _____ age group _____
	Shop assistant	
	Other:	

Special Interest areas: \_\_\_\_\_ Short term projects (3 months or less)  
 \_\_\_\_\_ One-day events (festivals, etc.) \_\_\_\_\_ At-home assignments  
 \_\_\_\_\_ Interviews by college students or media \_\_\_\_\_ On-going assignment

How many hours would you like to serve? \_\_\_\_\_ hrs

**Please indicate if the hours are \_\_\_ weekly or \_\_\_ monthly**

Are you open to receiving calls from the RSVP office on other/additional opportunities? Please circle Yes No

Optional – Information for statistical purposes only and a failure to answer or the nature of the answer will not affect the registration form.

Ethnic/Racial:

Afro/American \_\_\_\_\_ Hispanic/Latino \_\_\_\_\_ White \_\_\_\_\_ Native American \_\_\_\_\_  
 Asian \_\_\_\_\_ Bi-racial \_\_\_\_\_

Person to notify in an emergency \_\_\_\_\_  
 (Name and relationship)

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

RSVP Accident/liability insurance beneficiary designee:

\_\_\_\_\_  
 (Name and address)

As an RSVP volunteer, I understand I am not an employee of RSVP or the Tompkins County Senior Citizens' Council. If I use my personal automobile in my volunteer service, I will keep in effect automobile liability insurance, at least equal to the minimum limits required by New York State. I agree to report my volunteer hours according to RSVP guidelines.

X \_\_\_\_\_ X \_\_\_\_\_

Director of RSVP

(signature of volunteer)

Created on 1/07