



PROJECT 10♥20

Volunteer Information Sheet

***All information will be kept confidential.**

Name: _____

Age: ☐ 18-30 ☐ 31-50 ☐ 50+

Address/City/State: _____

Cell Phone: _____ **Do You Text?** ☐ Yes ☐ No

Alt Phone: _____ **Email:** _____

Emergency Contact: _____ **Cell Phone:** _____

How did you hear about us? _____

Any previous experience working with the homeless community? _____

Are there other areas of service within Project 1020 you are interested in?

☐ Driving ☐ Collecting Donations ☐ Other: _____

What would you like to get out of this volunteer experience? _____

Important Information:

WEBSITE:

www.Project1020.com

(volunteer info, SignUp Genius link, etc.)

SIGN UP FOR SHIFTS AND/OR MEALS:

SignUp Genius

GROUP COMMUNICATION:

SignUp Email/Facebook Group

GOING TO BE LATE:

Call Barb at 913.219.3347