



# Goodwill Garden Volunteer Form



Name: \_\_\_\_\_

Birth date: \_\_\_\_\_

Phone number: \_\_\_\_\_

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

Email: \_\_\_\_\_

Number you can be reached at if a rain day is necessary: \_\_\_\_\_

Which shifts would you prefer to volunteer:

- AM shifts
- Afternoon shifts
- Weekend shifts \*please note weekend shifts will not occur much frequently\*

Do you have your own handtools, gloves etc?

- Yes
- No

\*Having your own tools is not required to volunteer in the garden.

How did you hear about this volunteer opportunity?

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Are you required to do community service hours? If yes, please name the agency/program that is requiring the hours and how many hours you need?

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Volunteers that sign up to work in the garden may work as often as or as little as they choose:  
Explain your level of your desired involvement in the garden (Check all that apply)

- One time volunteer
- Would like to be contacted again for another opportunity
- Would like to volunteer weekly in the garden
- Would like to work with youth in the garden
- Would like to be contacted to volunteer in the garden if more volunteers were needed

Do have any physical limitations that would permit you to do only certain jobs in the garden?

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Do you have any current medical conditions? Do you take medication for these conditions? Please list:

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Do you have any allergies? Do you use medications for these allergies? Please list:

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Emergency Contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

Please send to:

Erin Parra and/or Jana Gillespie  
Wayne Youth Services  
4635 Howe Rd  
Wayne, MI 48184



\_\_\_\_\_  
(Signature of volunteer)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of parent or guardian if volunteer is under 18)

\_\_\_\_\_  
(Date)