



# Volunteer Form

Tomball Emergency Assistance Ministry: 300 W. Main Street / Tomball, TX 77375  
www.teamtomball.com / 281-255-6967 / http://teamtomball.com/volunteer

Volunteer       Group/School       Court-Ordered Community Service

*You must be at least 16 years of age to volunteer unless accompanied by a parent. Parents are required to complete Parent/Guardian Permission Form for any participants under the age of 18. Information is confidential.*

Today's Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month    day    year

Applicant's Name: \_\_\_\_\_

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
month    day    year

Please Print Clearly

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number / Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email1: \_\_\_\_\_ Email2: \_\_\_\_\_

Parent/Guardian Information (for Minors) Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you currently employed? Yes  No  Employer Name: \_\_\_\_\_

If retired, please list previous employer and position: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

If you are volunteering with a Group or School, Name of the Organization: \_\_\_\_\_

Are you a member of any religious organization(s) and/or service organization(s)? Yes  No

Religious Organization(s): \_\_\_\_\_

Service Organization(s): \_\_\_\_\_

Are you a student? Yes  No  School Name: \_\_\_\_\_

Have you ever volunteered at TEAM? Yes  No

If so, when? \_\_\_\_\_

Day of the week you prefer to volunteer (Please circle)

T    W    TH    F    SAT

Resale Shop Hours of Operation: 10 am to 5 pm

Food Pantry/Assistance Ministry hours will vary

I can work a partial day

I can work all day

How often do you prefer to volunteer?

Daily

Monthly

Weekly

Special Projects

I certify that all the information provided above is true and correct to the best of my knowledge. Should any of this information change during my service with TEAM, I will submit updated information to the organization at my earliest opportunity. I am submitting this application on behalf of myself or my child/guardianship as designated above.

Signature: \_\_\_\_\_

(Volunteer or Parent/Guardian)

## Tomball Emergency Assistance Ministries Volunteering at TEAM

At TEAM, we have a variety of volunteer roles that are important for our Assistance Ministry, our Food Pantry, and our Resale Shop to run effectively. We appreciate how each of our volunteers work to accomplish our Christ-centered mission to serve the Tomball community. Please let us know what you do well and we will do our best to place you where your skills will serve TEAM's needs.

**Your Skills and Abilities or Interests: (Please check all that apply)**

	Intake/ Receiving	Caseworker (working with Clients)
	Lifting/ Moving	Coaching/ Mentoring
	Sorting/ Organizing	Bookkeeping
	Merchandizing / Stocking	Reception/ Administrative/ Clerical
	Internet Search (Price Comparisons)	Recruiting/ Orientation
	Books	Carpentry
	Cashier	Small Repairs
	Crafts	Housekeeping (General Cleaning & Dusting)
	Electronics/ Computers	
	Housewares/ Home Decor	Computers and Computer Networks (IT)
	Interior Decorating	Website Design and Management
	Jewelry	Computer Graphic Design
	Movies	Database Management
	Music Genres	Email Marketing (Mailchimp)
	Shoes	Social Media (Facebook, Instagram, LinkedIn)
	Toys	Internet Sales (eBay, Facebook Marketplace)
	Vintage Items	
	Women's Accessories	Grant Writing
		Fundraising