



Thank you for considering us as a recipient of your time and energy. Our volunteers are part of what makes all our efforts so successful, and you are valued. Please complete the volunteer application and submit it back to Joanna. If you have not already set a time for an orientation and tour, please let us know and we get you set up after we receive your application.

Foundation for Senior Care Volunteer Description

Shifts are available from 8:00 a.m. to 5:00 p.m., Monday through Friday. To ensure volunteer safety and a beneficial experience for everyone, we ask that you follow these simple guidelines.

- We ask that volunteering be scheduled in advance. It is wonderful if you are available to come by, you are always welcome to visit.
- If you are scheduled for a ride or project and cannot make it, we ask you notify us as soon as possible.
- Anyone under the influence or in the possession of drugs and/or alcohol will not be allowed to volunteer.
- All volunteers must sign in upon arrival and sign out upon completion of their service. Or if driving, then please keep your time on the log.
- Any volunteer who has been sick, needs to be without symptoms (fever, vomit, diarrhea, jaundice...) for a minimum of 24 hours before volunteering.

Requirements for all program related volunteers

- For program volunteers (The Club and Advocates), a current TB clearance is required (must have been within the last year).
- A Live Scan clearance is required for Expanded Rides, and Advocate volunteers.
- Minimum Age: 15 with Parental/Guardian Permission.
- Maximum Age: really, that is up to you!
- Dress Code: Business casual, closed toe shoes required for volunteers at the Day Care.
- For volunteers who chose to work in the Fallbrook Adult Day Care please acknowledge the following:
1) You may be working in an environment where the elderly or disabled may express emotional or inappropriate behaviors. 2) Your work will be supervised by a staff member.
- Adherence to agency privacy and confidentiality policies to protect client information.

Office & Fundraising volunteers

- A willingness to help where needed.
- Open and honest communication about your skills and how we can make this fun for you too.

I am interested in volunteering in the following areas.

Office & Admin	<input type="checkbox"/>	Day Care	<input type="checkbox"/>	Care Advocates	<input type="checkbox"/>
Fundraising & Events	<input type="checkbox"/>	Driving Clients	<input type="checkbox"/>	Computers	<input type="checkbox"/>

Volunteer Application

Please complete this application form if you are interested in becoming a Foundation for Senior Care Volunteer. Once you complete the form, please submit to the Outreach & Development Officer.

Name	<i>First</i>	<i>Last</i>	<i>Nickname</i>
Home Address			
Home Phone	Cell Phone		
Email:			
Date of Birth			
In case of emergency contact	Name	Primary Phone:	

Availability: Please indicate the days and times you are usually available to volunteer.

	Mon	Tues	Wed	Thurs	Fri
Morning:					
Afternoon:					
The timeframe of availability: <input type="checkbox"/> call or email me with a need					
From:		to:		Hours per week:	

Skills and Interests

Accounting	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Musical Instrument	<input type="checkbox"/>
Data Entry	<input type="checkbox"/>	Organizing Events	<input type="checkbox"/>	Dancing Instruction	<input type="checkbox"/>
Social Media	<input type="checkbox"/>	Mailings	<input type="checkbox"/>	Art	<input type="checkbox"/>
Receptionist	<input type="checkbox"/>	Public speaking	<input type="checkbox"/>	Singing	<input type="checkbox"/>
Special projects	<input type="checkbox"/>	Work with others	<input type="checkbox"/>	Crafts	<input type="checkbox"/>
Project management	<input type="checkbox"/>	Internet research	<input type="checkbox"/>	Driving/Delivery	<input type="checkbox"/>
Clerical/Office	<input type="checkbox"/>	Community events	<input type="checkbox"/>	Yardwork	<input type="checkbox"/>
Computers	<input type="checkbox"/>	Calling clients	<input type="checkbox"/>	Handyman projects	<input type="checkbox"/>
Other?	<input type="checkbox"/>				

I understand that Foundation for Senior Care occasionally photographs, or videotapes activities held at its buildings and at special events in the community, for use solely in connection with official Foundation for Senior Care publications, its web site, or in social media. By volunteering at Foundation for Senior Care, I give my consent for Foundation for Senior Care to record and use my image to raise awareness about Foundation for Senior Care and its mission. If you do not want to be photographed, please check here:

I release Foundation for Senior Care, its sponsors, employees, board members, volunteers and agents from any and all claims and liabilities (including costs and attorney fees) arising out of or in any way connected to my volunteer activities, unless the claim is based upon the conduct of a Foundation for Senior Care employee in the course and scope of his or her employment. I further agree to indemnify and hold Foundation for Senior Care harmless from any and all claims arising from my conduct while volunteering for Foundation for Senior Care.

I am in good health. **I promise to try and have fun!**

Volunteer Name Signature <i>(Parent signature if under 18)</i>	Date
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