



# UNIVERSITY MEDICAL CENTER FOUNDATION Volunteer Corps

All UMC Volunteer Corps members are linked by a common goal – to make a difference.

## Volunteer Membership Form

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

Complete the following information. Please print:

Yes, I want to be a member of UMC Foundation:  Kids Corps (Ages 8-14)  Teen Corps (Ages 15-18)  Volunteer Corps (Ages 19+)

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_  
Home Phone(\_\_\_\_) \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_  
Email Address \_\_\_\_\_ Date Of Birth \_\_\_\_\_  
Employer \_\_\_\_\_ Referred by \_\_\_\_\_  
School \_\_\_\_\_ School District \_\_\_\_\_  
Emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_  
Dietary Restrictions/Allergies \_\_\_\_\_

T-Shirt Size: Youth - S  M  L  XL   
Adult - S  M  L  XL  XXL  XXXL

Please briefly list past or present volunteer service:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate any areas of interests:

- |  |   |
|--|---|
| <input type="checkbox"/> Arts & Crafts                       | <input type="checkbox"/> Music                                      |
| <input type="checkbox"/> Business Management                 | <input type="checkbox"/> Nutrition                                  |
| <input type="checkbox"/> Clerical                            | <input type="checkbox"/> Office Support                             |
| <input type="checkbox"/> Computers                           | <input type="checkbox"/> Photography                                |
| <input type="checkbox"/> Computer Graphics                   | <input type="checkbox"/> Public Speaking                            |
| <input type="checkbox"/> Event Organization                  | <input type="checkbox"/> Online Gift Store Fulfillment and Shipping |
| <input type="checkbox"/> Exercise                            | <input type="checkbox"/> Repairs and Maintenance                    |
| <input type="checkbox"/> Food Preparation                    | <input type="checkbox"/> Research                                   |
| <input type="checkbox"/> Foreign Language Spanish            | <input type="checkbox"/> Retail                                     |
| <input type="checkbox"/> Foreign Language other than Spanish | <input type="checkbox"/> Special Events                             |
| <input type="checkbox"/> Fundraising                         | <input type="checkbox"/> Telephone Tree                             |
| <input type="checkbox"/> General Organization                | <input type="checkbox"/> Teaching                                   |
| <input type="checkbox"/> Golf                                | <input type="checkbox"/> Typing                                     |
| <input type="checkbox"/> Journalism/Newsletter Production    | <input type="checkbox"/> Other                                      |

What is virtual volunteering?

Occasionally we have projects that can be done from your home. Virtual volunteering will frequently, but not always, involve telephone contact or computer skills.

Yes, I am interested in virtual volunteering.

### Volunteer opportunities:

- |   |   |
|---|---|
| <input type="checkbox"/> Active Aging               | <input type="checkbox"/> Nursing Scholarships       |
| <input type="checkbox"/> Asthma & Respiratory       | <input type="checkbox"/> Organ Donation             |
| <input type="checkbox"/> Children's Hospital        | <input type="checkbox"/> Poison Safety              |
| <input type="checkbox"/> Children's Miracle Network | <input type="checkbox"/> Rehabilitation             |
| <input type="checkbox"/> Cure Kids Cancer           | <input type="checkbox"/> Water Safety               |
| <input type="checkbox"/> Cancer Care Fund Adult     | <input type="checkbox"/> Substance Abuse Prevention |
| <input type="checkbox"/> Diabetes & Obesity         | <input type="checkbox"/> Volunteer Corps            |
| <input type="checkbox"/> Mental Health              | <input type="checkbox"/> Women's Health             |
| <input type="checkbox"/> Mother Baby                | <input type="checkbox"/> Any and All                |

### Best Times Available:

Please indicate days of the week and time of day when you would most likely be available

- |           |   |   |  |  |
|-----------|---|---|--|--|
| Monday    | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Tuesday   | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Wednesday | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Thursday  | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Friday    | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Saturday  | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |
| Sunday    | <input type="checkbox"/> 8:00 am-12:00 pm | <input type="checkbox"/> 12:00 pm - 3:00 pm | <input type="checkbox"/> 3:00 pm - 6:00 pm | <input type="checkbox"/> 6:00 pm - 9:00 pm |

Do you have any physical disabilities or conditions that might prevent you from certain types of activities?

No  Yes  If yes, please describe: \_\_\_\_\_

**Congratulations! As a member of University Medical Center Foundation's Volunteer Corps you truly make a difference! We greatly value the contribution of your time and energy!**

Please mail the completed form to: UMC Foundation of El Paso, 1400 Hardaway, Ste. 220, El Paso, TX 79903

Or Fax to: (915) 521-7201

If you have any questions, please call UMC Foundation at 915.521.7229. Thank you for your support!