



Retired and Senior Volunteer Program; Morehead State University Serving the FIVCO & Gateway Areas: Bath, Boyd, Carter, Elliott, Greenup, Lawrence, Menifee, Montgomery, Morgan, and Rowan.

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Volunteer Enrollment Form

Name: _____ **Birth Date:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

Referred to RSVP by: _____

Are you a veteran? (Y N) **Ethnicity:** Hispanic/Latino (Y N)

Gender: (Male) (Female)

Racial Group: Check one: (Am. Indian/Alaska Nat.) (White) (Asian)
(Hawaiian/ Pacific Isle) (Hispanic) (Black /or African American)

Preferred Volunteer Assignment(s)

Do you require any special accommodations or medical considerations that may impact a volunteer assignment? (Y N) If yes please briefly describe.

T-Shirt Size: (Small) (Medium) (Large) (XL) (2XL) (3XL)

Jacket Size: (Small) (Medium) (Large) (XL) (2XL) (3XL)

Emergency Contact Name _____

Phone Number _____

Address _____

Beneficiary for RSVP Accident Insurance

Name _____

Relationship _____

Address _____

I understand that my signature verifies all information provided is true and correct and gives permission to RSVP staff to contact organizations about my volunteer interests and find a rewarding volunteer opportunity for me.

I am also giving permission to Senior Volunteer Services to use photographs in which I appear singularly or in a group for the programs' marketing and advertising effort to seek more volunteers.

Application Date _____

Signature of RSVP Director _____

Signature of RSVP Volunteer _____