

SCHEDULED

WSP Check Completed

MCSAA 190 West Sentry Drive, Shelton WA 98584 Phone 360-426-7374 Fax 360-426-1955 www.mcsac.net

**Volunteers are the Heart and Soul of our Center.***If you would like to volunteer your talents to our organization, please check those areas where you would like to help below.***Volunteer Questionnaire**

Activities of interest or Skills you Possess– Please check all that apply &amp; fill in any blanks that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Serve on the MCSAA Board   | <input type="checkbox"/> Facility Management            |
| <input type="checkbox"/> Newsletter Publication   | <input type="checkbox"/> a. Electrical                  |
| <input type="checkbox"/> Newsletter & Flyer distribution  | <input type="checkbox"/> b. Plumbing                    |
| <input type="checkbox"/> Newsletter folding, sealing & mailing  | <input type="checkbox"/> c. Carpentry                   |
| <input type="checkbox"/> Teaching Computer Classes: Beg/Inter or Adv  | <input type="checkbox"/> d. Handyman/Repairs            |
| <input type="checkbox"/> Teach _____ Class (fill in your skill)   | <input type="checkbox"/> e. Painting                    |
| <input type="checkbox"/> Teach Genealogy Class  | <input type="checkbox"/> f. Janitorial                  |
| <input type="checkbox"/> Teach a Health/Diet/Nutrition Related Class  | <input type="checkbox"/> g. Garden/Grounds              |
| <input type="checkbox"/> Teach a writing class  | <input type="checkbox"/> Clerical/Secretarial           |
| <input type="checkbox"/> Teach a _____ exercise class   | <input type="checkbox"/> a. Data Entry                  |
| <input type="checkbox"/> Reception Desk (answering phones, taking money,<br>trips, registering new members) | <input type="checkbox"/> Are you computer literate? Y N |
| <input type="checkbox"/> Host (Make Coffee/tea/ maintain treats & utensils)                                 | Miscellaneous   |
| <input type="checkbox"/> Cook/clean/prep for Friday Lunches   | <input type="checkbox"/> b. Grant Writing               |
| <input type="checkbox"/> Volunteer to help with Special events  | <input type="checkbox"/> c. Fundraising                 |
| <input type="checkbox"/> Cook/clean/prep for Special Events   |   |
| <input type="checkbox"/> Decorate/Set up for Special Events   |   |
| <input checked="" type="checkbox"/> Provide entertainment   | Your Ideas: _____                                       |
| <input type="checkbox"/> Bingo Caller/set-up/take down/Karaoke Host   |   |
| <input type="checkbox"/> Potluck Help   |   |
| <input type="checkbox"/> Decorate the Center for seasonal cheer   |   |
| <input type="checkbox"/> Make Crafts to sell or decorate to our fundraisers                                 |   |
| <input type="checkbox"/> Photography (take pictures at events and of Members)                               |   |
| <input type="checkbox"/> Trip Driver (must have clean driving record)                                       |   |

**I hereby authorize a background check to be done by the  
W.S.P. Watch for the purpose of working with vulnerable adults and  
our insurance. This is required for any and all positions.**

Signature \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / 20 \_\_\_\_

PHONE # \_\_\_\_\_

Print Name: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Any other names used? \_\_\_\_\_

Additional information we might find useful? \_\_\_\_\_

Last Name, First \_\_\_\_\_

Member # \_\_\_\_\_

New Member

Renewal

Key Tag X \_\_\_\_\_