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Volunteer Registration Form

Please fill out and return this sheet to Volunteer Services. You will then be entered into our database and informed of upcoming projects.

PLEASE WRITE CLEARLY

Name: _____

Address: _____

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

Home Ph: _____ **Work Ph:** _____ **Cell Ph:** _____

Fax: _____ **Email:** _____

With your email, you authorize us to send you HfH newsletters and info

Age Group: *Federal & insurance regulations limit the type of work volunteers under 18 years of age can perform*

- 14-15 years of age 16-17 years of age 18-55 years of age 55+ years of age

The following information is important in support of grants and government funding:

- Ethnicity: American Indian or Alaskan Native Native Hawaiian or Pacific Islander
 Black or African American (Hispanic) Black or African American (Non-Hispanic)
 Asian White (Hispanic) White (Non-Hispanic) Other

Date of Birth _____ Gender: ___ M ___ F

Signature: _____ Date: _____

AFFILIATIONS

1) Are you volunteering as a result of court-ordered community service? Yes No

2) Are you volunteering for a school, service club, or place of employment?
 If yes, please answer the question below. Yes No

What school, service club, or place of employment prompted your volunteering? _____

VOLUNTEER INTERESTS – Please mark all that apply

- General Construction Becoming a Donor Committee / Board Position
 ReStore

===== FOR OFFICE USE ONLY =====

Entered in Keystone Initials _____ Date _____