

Group Volunteer Form



Name of Group: _____ **Date:** _____

Group Contact Person: _____ **Contact #:** _____

Volunteer Program (please check the area that you volunteered):

Visiting Chef
 Family Activity
 House Helper
 Lawn & Garden
 Outdoor Project
 Special Events

Volunteer's Full Name	Permanent Mailing Address	Email Address	Cell #	Home #	Hrs
Ronald McDonald	1600 SW 14 th Street Gainesville, FL 32608	Ronald@rmhgainesville.org	352-374-4404	352-374-4404	4