



# *R.E.A.C.H.*

## *Volunteer Registration Form*

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

### **Areas of interest:**

#### **\*Direct Client**

#### **Non-Direct**

*Court Advocacy		Community Outreach/Info. Booths	
*Hotline		Office Assistance	
*Shelter Volunteer		Yard Work/Maintenance	
*Client Transportation		Fundraising/Events	
*Rape Crisis		Thrift Store Work	
*Child Care/Advocacy		Marketing	
*Office Assistance/ Data Entry		Other	

**Other (please specify)** \_\_\_\_\_

\*Direct client service volunteers must be able to attend **20hours** of training **prior** to working with clients.

Please indicate below your **days and times** of availability:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**For additional information regarding volunteering or donations, please contact:**

*R.E.A.C.H. of Macon County (also serving Jackson County)*

\*Macon Office: 828-369-5544 \*Jackson Office: 828-586-8969 \*Fax: 828-524-4535

Email: reach@reachofmaconcounty.org

P.O. Box 228 Franklin, NC 28744