

CCHASM THANKSGIVING PROGRAM 2019

VOLUNTEER FORM

WE ♥ VOLUNTEERS!

GET INVOLVED!
WWW.CCHASM.ORG TO LEARN MORE.



Chesterfield - Colonial Heights - Dinwiddie - Hopewell - Petersburg - Prince George

Name of Church or Organization:		
Mailing Address:		
Salutation:	First Name of Contact:	Last Name of Contact:
Position:	E-Mail Address:	Phone Number:
Number of people in your group (including yourself)		
Name(s) of any minor children (first and last name)		
Name(s) of parent(s) who will accompany the child(ren) (first and last name)		
Indicate below the shift(s) that you plan to attend (select all that apply)		
<input type="checkbox"/> Monday, Nov. 18 9a - 5p (sorting and packing) <input type="checkbox"/> Tuesday, Nov. 19 11a - 7p (sorting and packing) <input type="checkbox"/> Friday, Nov. 22 9a - 12p (distribution to the homebound and final packaging, if needed) <input type="checkbox"/> Saturday, Nov. 23 7:30a - 6p (package distribution)		

➡ **All volunteers must be at least 12 years of age and must be able to lift 25 pounds. Each child under the age of 18 must be accompanied by a parent or guardian who will stay with the child throughout the Volunteer process. One parent or legal guardian per child.**

➡ **Each volunteer must sign a Hold Harmless and Indemnity Agreement/Photo Release Form prior to volunteering. Download a copy of the form from the CCHASM website at www.chasm.org.**

Fax Volunteer Forms to CCHASM at (804)655-6755 or mail to:
CCHASM, PO Box 1741, Chesterfield, VA 23832

**Thank you for your participation and
volunteer service!**