



**ANTRIM COUNTY
VETERANS AFFAIRS**

P.O. Box 1049, Bellaire, MI 49615
(231) 533-8499 Fax (231) 533-8317

VOLUNTEER APPLICATION

Name: _____

Address: _____

Phone: (home) _____ (cell) _____

E-mail: _____

Emergency Contact: (name) _____ (phone) _____

Past Volunteer Experience: _____

Are you currently employed? YES NO

If so, where? _____ (phone) _____

TIME AVAILABLE OR VOLUNTEERING

(Circle all that apply)

Monday	Tuesday	Wednesday	Thursday	Friday
Weekly	Semi-weekly	Monthly	As Needed	
	Mornings	Afternoons		

What is the best way to reach you? _____

How far in advance do you need to be notified of available volunteer work? _____
