



Volunteer Application

Name _____

Street Address / Apt: _____

Bethesda, MD Zip Code _____

Home Phone _____ Cell Phone _____

Email _____

How would you like to be involved? (Check All That Apply)

- Transportation to doctor visits, shopping, etc.
- Occasional light chores
- Occasional errands
- Phone calls and scheduled "check-in visits"
- Help with grocery shopping
- Simple tech help
- Other services as members' needs arise

Applicant's Signature

Date:

Please mail or deliver this application to

Joe Susick
Volunteer Coordinator
10427 Montrose Avenue, Apt 203
Bethesda, MD 20814

Or send a scan of the document to

volunteers@ParksideVillageMD.org