



ELDER-AID

Serving the Brazos Valley since 1990

Volunteer Application

Date: _____

Name: _____ Phone #: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Possible Volunteer Opportunities (Check all that apply):

Clerical Minor Home Repair Transportation

Marketing Mowing Light Housekeeping

Fundraising & PR Weed Eating Home Visits

Phone Buddy Other: _____

Are you volunteering as part of a class assignment/ project?

Are you volunteering for community service through the Adult Probation?

If yes, provide nature of offense: _____

Days and hours available: _____

Additional information you would like to share? _____
