

Volunteer Opportunity Form



PO Box 8353
Portland, OR 97207
Phone 503 698-8382
Fax 503 691-8410

Name: _____ Company: _____

Address: _____
Street City State Zip Code

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

Email: _____ Website: _____

Have you volunteered with ReFIT before? _____ Project(s): _____

Do you belong to a professional organization? _____ Name of Organization(s): _____

Please check one of the following volunteer opportunities:

- Cash Donation.** Your cash donation allows us the opportunity to expand our programs. **Amount:** \$ _____
- Materials Donation.** Donation of materials will directly assist in the completion of home modifications. We accept general material donations or we are happy to accept your commitment to help meet material needs for specific projects.
- Volunteer.** Volunteers, both skilled and unskilled, are invited to join us on one of our projects.
- Project Manager.** Coordinates the materials and scope of work to be completed on project.
- Serve on Board or Committee.** Volunteers are needed to participate on the following committees (please check one):
 - Volunteer Committee: Keeps track of Volunteer Data and informs them of up and coming projects. Assists Project committee on acquiring volunteers based on what skills are needed for the project.
 - Project Committee: Screens and coordinates all ReFIT projects.
 - Fundraising Committee: Plans all fundraising, event planning and public relations opportunities.

Please check the skills you would like to offer:

- | | | | |
|----------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Telephone calling | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Photography | <input type="checkbox"/> Grant writing |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Painting | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Framing/Drywall | <input type="checkbox"/> Drywall | <input type="checkbox"/> Appliance Install | <input type="checkbox"/> Cabinetry |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Window/Doors | <input type="checkbox"/> HVAC | <input type="checkbox"/> Drafting/CAD |
| <input type="checkbox"/> Project Managing | <input type="checkbox"/> Architect | <input type="checkbox"/> Home Designer | <input type="checkbox"/> Interior Designer |
| <input type="checkbox"/> Floor Install | Type: _____ | <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> Yes, I am a licensed contractor in good standing. | CCB #: _____ | | |

Return this form to:
PO Box 8353
Portland, OR 97207

Sign Up Received On _____ *For office use only* Volunteer Notification _____ Entered In Database _____