

West Midland Family Center



Group Information Form

Organization or Group Name _____

Address _____ City _____ Zip _____

Primary Contact Person _____ Email _____

Work Phone _____ Cell Phone _____

Secondary Contact Person _____ Email _____

Work Phone _____ Cell Phone _____

Tell us about your group: _____

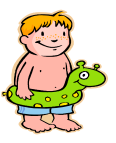
What type of service project is your group interested in doing? (Circle all that apply)
Clerical Grounds Maintenance Special Event Facility Maintenance
Cooking Serving Meals Food Drive Organizing
Other _____

Why is your group interested in volunteering at West Midland Family Center? _____

How many people will be in your group? _____ Primary Age/s of the Group _____

How frequently does your group wish to volunteer?
Temporary Service:
Half Day Full Day Week Month Other _____
Ongoing Service:
Weekly Monthly Quarterly Twice a Year Once a Year
Other _____

What date/s and time/s does your group wish to volunteer? _____



In the future, our group might be interested in donating:

Food
Books

Clothing
Other _____

Hygiene Items

School Supplies

Household Items

Does your group wish to use photographs of service for any publicity or marketing purposes? (Any photos of children or youth require a written release from parent/guardian.) Yes No Comments: _____

Please tell us if your group has any special needs, skills or wishes for their service experience: _____

Anticipated Volunteers:

	Name	Email Address
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____



As the contact person for our group, I agree to alert the Connect & Serve Coordinator to any changes in the above information, including but not limited to:

- Final head count of participants 3 business days in advance of project.
- Notification of cancellation or need to reschedule 1 week in advance.

Signature _____ Date _____

THANK YOU!

Please return completed form by email, fax or mail:

Gail Crosby
 Connect & Serve Coordinator
 West Midland Family Center
 4011 W. Isabella Rd. (M-20) Shepherd, MI 48883
 (989)832-3256 fax -832-5755 crosbyg@wmfc.org

Check out our website at: wmfc.org