



**Volunteer Center of  
Morgan County**  
HANDS ON NETWORK

# Kids Interested in Volunteer Service

811 2nd Avenue SE, Suite 1  
Decatur, Alabama 35601  
(256) 355-8628; Fax (256) 355-8726; [www.vcomc.org](http://www.vcomc.org)

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Last Name                      First Name                      Middle                      Male    Female (Circle One)

Home Address                      City                      State                      Zip                      Home Phone                      Other/Cell Phone

Age                      Birth Date                      Email Address

School Name                      School Grade                      What school will you attend next year?  
(as of September 1, 2016)

How did you hear about us? \_\_\_\_\_

Why do you want to volunteer? \_\_\_\_\_

Hobbies, skills, special awards, and club memberships: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe previous volunteer experiences: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mother's Name	Home Phone	Cell Phone
Mother's Place of Employment	E-mail	Work Phone
Father's Name	Home Phone	Cell Phone
Father's Place of Employment	E-mail	Work Phone
Emergency Contact	Relationship	Phone

I hereby give consent for my child to participate in the Kids Interested in Volunteer Service program:

\_\_\_\_\_  
*Signature of parent or guardian* *Date*

For office use only  
 Interviewer's Comments:

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Interviewer's Initials \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_