

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Today's Date \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

**Please check membership desired:** \_\_\_\_\_ **Volunteer** \_\_\_\_\_ **Contribution Only**

Donations always accepted \$ \_\_\_\_\_

*I understand as an active volunteer I will be asked to complete volunteer training and required paperwork.*

**Please check volunteer activities of interest to you:**

\_\_\_\_\_ Café Latte \_\_\_\_\_ Jewelry Fair/Other Fundraisers \_\_\_\_\_ Officer/Board Member

\_\_\_\_\_ Information Desk \_\_\_\_\_ Seasonal Decorating

\_\_\_\_\_ Gift Shop \_\_\_\_\_ Membership/Recruiting

\_\_\_\_\_ Other \_\_\_\_\_

Unable to commit at this time but please call me, I might be able to substitute where needed \_\_\_\_\_.

***Please return completed form to: BVRMC Auxiliary Membership, P.O. Box 931, Storm Lake, Iowa 50588.***

If you have any questions, call Mary Drey, Volunteer Coordinator at 712.213.8619.