



HERITAGE
CHRISTIAN SERVICES

Empowering people. Enriching lives.

VOLUNTEER APPLICATION FOR CORPORATIONS
HERITAGE CHRISTIAN SERVICES

(please print)

Today's Date: _____

Group Information

Name of Corporation: _____

Address: _____

City _____ Zip code _____

Primary Contact Name: _____

Phone: _____

Email: _____

Does anyone in your group have allergies? Yes No

Animals ___ Smoke ___ Other _____

Please explain: _____

Any physical limitations? _____

Volunteer Experience

Have you volunteered with Heritage Christian Services Before? Yes No

If yes, please explain: _____

If no, how did you hear about HCS: _____

Availability and Preference

Area of Interest (please circle):

Residential

Spiritual care

Day Programs

Respite

Special Events

Finger Lakes Region Only

A Second Thought Resale Shop

Springdale Farm

Heritage Christian Stables

Bakery

Pieters Family Life Center

Western New York Area Only

Club Adventure

Community Garden

Other: _____

Date(s) you wish to volunteer: _____

Time Frame: _____

Expected Number of People _____
(please let us know if anyone under 18 years old will be volunteering)

Additional Information

1. Would you like to receive information about Heritage Christian's Young Professionals group?
 Yes No

2. Would you be interested in learning about corporate sponsorships or how you can get involved with the Golf Classis or Heritage Hero 5K + Mile Stoll & Roll?
 Yes No

Primary Contacts signature _____ Date _____