



# Neighbors in Need

P.O. Box 447, Lawrence, MA 01842 • 978-685-8321  
www.needfood.org • volunteer@needfood.org



## Volunteer Application

Date: \_\_\_\_\_

*\*\*Please Note: For the safety of our community, all volunteers must be vaccinated against COVID-19.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ ☐ Please do not add me to mailing list

Cell phone: \_\_\_\_\_ Other phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Where did you learn about our volunteer opportunities? \_\_\_\_\_

Languages spoken other than English: \_\_\_\_\_

Please list any relevant volunteer or work experience: \_\_\_\_\_

When are you available? \_\_\_\_\_

Can you lift 50 or more pounds? Yes No

What types of volunteer positions interest you? ☐ Packing/sorting groceries ☐ Diaper Pantry  
☐ Making Deliveries ☐ Office Work ☐ Other \_\_\_\_\_

Do you have a valid driver's license? Yes No License #, State: \_\_\_\_\_

**Photo Release:** Photos are often taken of NIN volunteer events/activities. Photos and related stories may be used by NIN and/or our partners such as the Massachusetts Service Alliance (MSA) in print and/or electronic/online materials such as websites, social media, emails, presentations, newsletters, brochures and annual reports.

**Please check the following, as appropriate:**

☐ I give my permission for Neighbors in Need (NIN) to take my photo and to use photo(s) for the purposes of fundraising and public relations, including use with partners such as MSA.

☐ I give permission for NIN and partners to identify me by name in any photos/related stories.

OR

☐ Please do not take my picture at NIN volunteer events. You may use my name. Yes No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date