

ShareLife Volunteer Interest Form

1. Parish Name

2. City Name

3. Contact Information

Name

Address

City/Town

State/Province

ZIP/Postal Code

Country

Email Address

4. Phone Number

Cell

Home

5. What's the best way to contact you?

- Email
- Phone call
- Text message

6. Have you volunteered for ShareLife before?

- Yes
- No

7. If yes, when did you start volunteering for ShareLife? (Year)

8. Would you like to join the ShareLife Committee?

- I am already a Committee Member
- Yes, I would like to be part of the ShareLife Committee at my parish
- No, I don't want to join the Committee but I would like to volunteer for an event or activity

9. If you are already part of the ShareLife Committee, what's your current role?

- Chairperson
- Committee Member
- Secretary
- Other (please specify)

10. What are your key interests in helping the campaign?

- Organizing events
- Meeting donors
- Committee leadership
- Taking photos for the newsletters
- Booking agency speakers
- Assisting with technology and video presentations
- Other (please specify)
- Promoting on social media
- Cooking for events and bake sales
- Speaking at masses and events
- Recruiting new volunteers
- Setting up visual displays

11. Any suggestions for the ShareLife campaign?

12. When is your birthday (date/month) ?

13. Would like to join our mailing list?

- Yes, I would like to receive periodic updates from ShareLife
- No, thank you