



Volunteer Interest Form

Thank you for your interest in volunteering with us!

Please complete the form below so we can learn more about your interests and availability.

Full Name: _____

Preferred Name (if different): _____

Email Address: _____

☐ Yes, you may contact me at this email ☐ No

Phone Number: _____

☐ Yes, you may call and leave a message ☐ No ☐ Office Support / Admin Tasks

Areas of Interest (Check all that apply):

- ☐ Youth Group Support
- ☐ Adult Group Support
- ☐ Social Wellness Support
- ☐ School Group Support
- ☐ Grief Camps (children/teens) or (family)
- ☐ Community Outreach
- ☐ Events
- ☐ Fundraising
- ☐ Food / Snack Support
- ☐ Other: _____

Availability (days/times or seasonal):

Relevant Experience of Skills: (e.g., working with children, event planning, grief work, language skills)

Why are you interested in volunteering with Gabby's Grief Center?

