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**Registration Form**

*RSVP (Retired and Senior Volunteer Program)*

**TODAY’S DATE:**

**DATE OF BIRTH:** *(Required: You must be at least 55 years old to be an RSVP volunteer.)*

**NAME:**

 Last First Middle

**ADDRESS:** **CITY/STATE:**

**ZIP:** **PHONE:** **EMAIL:**

##### Will you drive to and from your volunteer activities? YES [ ]  NO [ ]

**RSVP VOLUNTEER DRIVER STATEMENT**

I understand that if I use my personal automobile while volunteering, I will keep in effect a valid driver’s license and auto insurance equal to or greater than the minimum required by Washington state or by the state where my auto is insured.

**Driver’s License Number:**

**RSVP VOLUNTEER SUPPLEMENTAL ACCIDENT and LIABILITY INSURANCE** is provided (plus a small death benefit) while you perform volunteer duties. This coverage is automatic and free of cost as long as you are an active, enrolled RSVP member. Please provide the following information:

**Beneficiary Name:** **Beneficiary** **Relationship:**

**Beneficiary Phone:** **Beneficiary Address:**

**DEMOGRAPHIC INFORMATION** *(Optional: Funders often ask us for demographic information.)*

**Ethnicity**  **Gender** **Member of the LGBTQ Community**

[ ]  Hispanic, Latino or Spanish Origin[ ]  Female[ ]  Yes

[ ]  Not Hispanic, Latino or Spanish Origin[ ]  Male[ ]  No

 [ ]  Nonbinary/ Gender Fluid

**Race**

[ ]  American Indian, Native American or Alaska Native[ ]  White

[ ]  Asian or Asian American[ ]  Multi-racial (any two or more of the above)

[ ]  Black or African American

[ ]  Native Hawaiian or Other Pacific Islander [ ]  Other

**Veteran/US Armed Forces** (check all that are true):

[ ]  I am a Veteran[ ] [ ]  [ ]  I am an active US Armed Forces Service member[ ] [ ]  [ ]  I have a family member in the US Armed Forces

Volunteer Signature *(required):* Date

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**VOLUNTEER PREFERENCES & EXPERIENCE**

What type of volunteer work are you interested in?

Geographic preference:

Describe your past occupation or volunteer experience.

Please list site(s) where you volunteer.

Any physical/medical limitations?

How did you hear about RSVP?

Are you interested in being on our special list for one-time volunteer opportunities? YES [ ]  NO [ ]

## *Please check your top 3 choices for a volunteer position.*

**AGING IN PLACE**

[ ]  Adult Day Care

[ ]  Food Delivery

[ ]  Transportation

[ ]  Companionship

[ ]  Chore Services

[ ]  Medicare Counseling

**IMPROVING ECONOMIC OPPORTUNITIES**

[ ]  Habitat for Humanity
(building homes)

[ ]  Habitat for Humanity
(assisting families)

[ ]  Adult Basic Education

[ ]  GED Tutoring/ ESL Tutoring

[ ]  Adult & Family Mentoring

**EDUCATION**

[ ]  Elementary Education Tutoring

[ ]  Elementary Education Mentoring

[ ]  Secondary Education Tutoring

[ ]  Secondary Education Mentoring

**CAPACITY BUILDING**

[ ]  Managing/ Recruiting Volunteers

[ ]  Representing RSVP in the Community

[ ]  Garnering Donations

[ ]  Supporting Blood Drives

**HEALTH & NUTRITION**

[ ]  Food Banks

[ ]  Nutrition Education

[ ]  Community Gardening

[ ]  Provide Information & Resources

**OTHER**

[ ]  Childcare

[ ]  Newsletter Writing/ Interviewing

[ ]  Supporting Veterans

[ ]  One-time Service Projects

[ ]

[ ]

***Please return this form to RSVP or the coordinator at your site.***

#### **Phone:** 206.694.6786 | **Fax:** 206.694.6777 | 1501 N 45th St, Seattle, WA 98103 | **Email:** **rsvp@solid-ground.org**