TOTALLY KIDS INC.



All Kids, All the Time

Volunteer Application

Name				
Last	First	Middle	Age	
Address:				
Mailing a	nd physical			
City		State	Zip Code	
Telephone				
Cell/hom E-mail		Work		
Emergency Contact _ No	ame		Phone	
Please Answer the fol	lowing questions:			

1) Why are you interested in becoming a volunteer for Totally Kids?

2) Have you ever volunteered for anoth	er organization? Yes No		
3) If you have volunteered, where did y you do when you were volunteering?	ou volunteer and what type of work did		
4) Do you have a criminal record or an give you a position as a volunteer?	y charges or reasons why we should not		
I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I also understand that this is not an application for paid employment. I give Totally Kids and its representatives permission to run a background check. I will keep all child/children information and general information about Totally Kids, Inc. and its programs confidential.			
Signature	Date		