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**TRAIL Volunteer Application**

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| **Name: Date:** |
| **Home phone: Cell phone:**  |
| **Home Address:** |
| **Email:**  |
| **When do you want to volunteer? (Please highlight or circle all that apply)** **M T W Th F Sat Sun 8-11 am 11 am - 2 pm 2-5 pm 5-8 pm 8-11 pm** |

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| **VOLUNTEER OPPORTUNITIES (please highlight or circle)**  |
| **Transportation**Local Transportation Airport Transportation |
| **In-Home Tasks**Bulbs and Batteries Errands Friendly Visits Home Checks Housekeeping Meal Preparation Miscellaneous Moving Furniture Organizing Pet Care Repairs Seasonal Décor Watering Houseplants |
| **Yard and Garden** Garden/Weeding Landscaping Mowing Mulching Sweeping Walkways Tree Trimming Watering Plants |
| **Health and Wellness** Rise and Shine Medical Advocacy |
| **Technology**Mac Support PC Support Social Media Telephone Other |
| Board/Committee Membership |

*THANK YOU!*