

Western Alliance Volunteer Application

Name	Address
Home Phone	
Work Phone	
Cell Phone	

E-mail _____ Date _____

AGE: _____

(If under 18 years of age, parent or guardian must provide consent by signing below):

Parent/Guardian Signature

What are you interested in doing?	
• General Office Work	• CyperPals/Computer
<input type="radio"/> Typing	<input type="radio"/> Refurbish computers
<input type="radio"/> Filing	<input type="radio"/> Test computers
<input type="radio"/> Answering phone	<input type="radio"/> Provide home training
<input type="radio"/> Copying mailings	<input type="radio"/> Troubleshoot computers
<input type="radio"/> Folding mailings	<input type="radio"/> Configure computers
<input type="radio"/> Stuffing envelopes	<input type="radio"/> Organize Equipment
• Special talents	
<input type="radio"/> Photography	<input type="radio"/> Peer Counseling
<input type="radio"/> Web site maintenance	<input type="radio"/> Other
<input type="radio"/> Handyman/handywoman jobs (painting, tiling, hanging pictures, etc.)	

Please return application to:

Mechelle Holt
Western Alliance CIL
30 B London Rd
Asheville NC 28803