



Dedicated to offering quality life style choices
to teens and adults with disabilities.

Volunteer Application

| | |
|------------------------|-----------------------|
| Last Name: | First Name: |
| Street Address: | City: |
| State: | Zip: |
| Email address: | Contact Phone: |

Interests

Tell us in which areas you are interested in volunteering. Please check all that apply.

- Public Speaking
- Board Development
- Activities Planning
- Fundraising
- Advocacy
- Administrative
- Website/ Newsletter
- Volunteer coordination
- Jr. Buddy
- Chaperone

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us. For the safety of our participants we require background screening for all volunteers. We will require a copy of your drivers license.

Some Place Special, Inc. P.O. Box 14954 Clearwater, FL 33766
Visit our website www.someplacespecial.org for current information
A 501 (c)(3) Non-Profit Charitable Organization EIN # 26-3826873