

Date _____

East Lansing Prime Time Volunteer Application

Name _____

Address _____

Phone _____ Email _____

Emergency Contact _____

Relationship _____ Phone _____

Volunteer Opportunities: Please see description of each job on next page.

_____ Art Studio Volunteer

_____ East Lansing Public Schools Volunteer

_____ Friends of Prime Time

_____ Friendly Visitor

_____ Newsletter Mass Mailing

_____ Senior Commission

_____ Skills and/or talents you would be willing to share

The following will be kept in strict confidence and will help us help you in the case of an emergency: Do you have any health or medical conditions you think we should know about?
