



Kerby Centre

Kerby Centre Group/Corporate Volunteer Form

Company/Group Name:

Primary Contact: (please circle the preferred method of contact)

First Name	Last Name
E-mail <input type="checkbox"/>	
Phone <input type="checkbox"/>	Secondary Phone <input type="checkbox"/>

Are you interested in becoming a supporter of Kerby Centre?

<input type="checkbox"/>	Interested in becoming a donor or sponsor
<input type="checkbox"/>	Already a donor to Kerby Centre
<input type="checkbox"/>	Only interested in a volunteer opportunity

What area of volunteering would your company like to be considered for?

- | | |
|--|---|
| <input type="checkbox"/> Special Events | <input type="checkbox"/> Maintenance / Facility upgrade |
| <input type="checkbox"/> Adult Day Program | <input type="checkbox"/> Other |
-

How many participants would be involved?

What is your groups' availability? Do you have a specific date in mind?

Kerby Centre hours are Mon-Fri 8:00 am – 4:30 pm
(with the occasional event held outside of regular hours)

What skill-set or specialties does your group bring with them?

How did your group hear about the Kerby Centre?

What would your group like to gain from this experience?

PHOTO RELEASE:

I hereby consent for the Kerby Centre to use my personal image of any photos taken during my volunteer time for the purpose of promotional, marketing and educational materials.

Yes _____ No _____