



Youth Volunteer Application

Name: _____ Date: _____

Address: _____

Home Phone: _____ Cell phone: _____

Email: _____ (Please circle preferred method of communication)

School: _____ Birthday: ____/____/____

Grade: _____

Please check all volunteer opportunities that interest you:

_____ **Special Events Team:**

Assist with special events and fundraising throughout the year.

_____ **Noogieland Team (requires additional application):**

- Assist Children and Families Coordinator on Noogie Nights. Noogie Nights include structured activities and free play for children ages 5-12 who are touched by cancer.
- Assist Children and Families Coordinator with Family Time Events. Family Time Events are themed, open to the public, and geared towards children and families who are touched by cancer.

_____ **Youth Committee (requires additional application):**

- A group of Westchester County teens who help to raise awareness about Gilda's Club Westchester through the planning of community events and organizing an awareness day in their own schools.

(Please complete BOTH sides of this application.)

Please provide the following information:

Best times for volunteering:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
9am-12 pm							
12-4 pm							
4-6 pm							
6-9 pm							

Please give any other information you would like us to know about you:

(Special talents or skills, how you heard about volunteer opportunities at Gilda's Club, etc.)

Please tell us why you want to get involved at Gilda's Club:

Official Use Only

Date of Orientation: _____ Notes _____

Please return to Gilda's Club Westchester, attention Miranda Dold:

Fax to: 914-644-8284 OR Email to: mdold@gildasclubwestchester.org

OR Mail to: Gilda's Club Westchester, Attn: Miranda Dold, 80 Maple Avenue, White Plains, NY 10601