

NJ AniMeals Volunteer Application

Thank you for your interest in volunteering. We will contact you when we have received your application to discuss our program and your interests.

Last: _____ First: _____

Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

E-Mail: _____ Phone Number: _____

Emergency Contact: _____ Phone Number: _____

Time Available (please be specific as to days of week and times):

Interest and Skills (please check all that apply)

Clerical		IT Support	
Computer Skills		Social Media	
Donation Pick-Up		Special Events	
Food Drive		Stocking and Sorting	
Food Distribution		Website Development	
Fundraising		Other**	

** Please Explain: _____

Do you own a truck or SUV for donor pick up? Yes _____ No _____

Signature _____ **Date** _____