



FISH of McHenry Food Pantry

815-344-4717

www.fishofmchenry.org

VOLUNTEER APPLICATION & INFORMATION SHEET

Date: _____

Last Name: _____

First Name: _____

Street Address: _____

City: _____

Zip Code: _____

Home Phone: _____

E-Mail _____

Church/Organization Affiliation, if any: _____

Languages Spoken, or other Expertise: _____

How did you hear about FISH?: _____

In case of emergency, please notify:

Name: _____ Relationship: _____

Daytime Phone: _____ Eve/Wkd Phone: _____

I am usually able to work (days/weekends): _____

Do you have any physical limitations? _____

I would be interested in volunteering in the following area(s) and shift(s):

TUESDAY 8:30am – 11:30am

Jobs with Client Contact:

- ___ Office Help (Phones, Filing)
- ___ Client Registration & Renewal
- ___ Assist Clients with Food
- ___ Interpreting to Clients

Jobs w/o Client Contact:

- ___ Warehouse sort/date coding
- ___ Filling Client Food Orders
- ___ Stave Vegetable Pickup (*seasonal*)

TUESDAY 11:00am – 2:00pm

Jobs w/o Client Contact:

- ___ Computer Data Entry
- ___ Warehouse sort/date coding
- ___ Maintenance (cleaning/mopping)
- ___ Restocking of Pantry
- ___ Accepting Food Donations

THURSDAY 8:30am – 11:30am

Jobs with Client Contact:

- ___ Office Help (Phones, Filing)
- ___ Client Registration & Renewal
- ___ Assist Clients with Food
- ___ Interpreting to Clients

Jobs w/o Client Contact:

- ___ Warehouse sort/date coding
- ___ Filling Client Food Orders
- ___ Stave Vegetable Pickup (*seasonal*)

THURSDAY 11:00am – 2:00pm

Jobs w/o Client Contact:

- ___ Computer Data Entry
- ___ Warehouse sort/date coding
- ___ Maintenance (cleaning/mopping)
- ___ Restocking of Pantry
- ___ Accepting Food Donations

SATURDAY 9:00am – NOON

Jobs w/o Client Contact:

- ___ Warehouse sort/date coding
- ___ Transfer of Food from Whse.
- ___ Pickup/Delivery Food Drives

Additional Volunteers are needed for the following areas. Please check if you are interested:

- ___ Pickup of Food Drives
- ___ Church Donation Contact
- ___ School Donation Contact
- ___ Holiday Donations
- ___ Fundraising Committee
- ___ Grant Writer

I am able to start working: _____ Signature: _____

Please mail this form to: FISH of McHenry PO Box 282 McHenry, IL 60051 or drop it at the pantry during regular open hours, Tuesdays & Thursdays between 9:00am - 11:30am at McHenry Township Building, 3703 N. Richmond Rd., rear lower level. **WE THANK YOU FOR YOUR INTEREST IN VOLUNTEERING!**