Christopher Lamont Cosper Foundation

Lightning Strikes Building Futures Program

**A lightning bolt in the sky

Description automatically generated**

**Volunteer Application Form**

**Personal Information**

* **Full Name:**
* **Date of Birth:**
* **Email Address:**
* **Phone Number:**
* **Address:**

**Availability**

* **Days Available:** (Please check all that apply)
  + [ ] Monday
  + [ ] Tuesday
  + [ ] Wednesday
  + [ ] Thursday
  + [ ] Friday
  + [ ] Saturday
  + [ ] Sunday
* **Times Available:** (Please specify hours)

**Volunteer Interests**

* **Areas of Interest:** (Please check all that apply)
  + [ ] Administration
  + [ ] Event Planning
  + [ ] Fundraising
  + [ ] Community Outreach
  + [ ] Tutoring/Mentoring
  + [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Skills and Experience**

* **Relevant Skills and Experience:**

**Emergency Contact**

* **Full Name:**
* **Relationship:**
* **Phone Number:**

**Consent**

* **By submitting this form, I agree to abide by the policies and guidelines of the organization.**
* **Signature:**
* **Date:**