SHMC Volunteer Information Sheet

Name:

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Age: Phone

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Email:

What service(s) would you be willing to offer?

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| Babysitting: |  |
| Pet sitting |  |
| Lawn Work |  |
| Organization |  |
| Tutoring |  |

If yes, list subjects you could tutor:

Can drive Can provide own transport  Needs transport 

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Certifications or training (ie. CPR, first aid, etc.):

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Experience:

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Anything else we should know?