



# Volunteer Registration

Solid Ground  
RSVP Coordinator: 206-957-4779 X116  
Fax: 206-957-2677  
1501 N 45<sup>th</sup>, Seattle, WA 98103  
Email: [kcrsvp@solid-ground.org](mailto:kcrsvp@solid-ground.org)

Today's Date \_\_\_\_\_

Date of Birth \_\_\_\_\_ **Required**—*You must be at least 55 years old to be an RSVP volunteer*

NAME: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE : \_\_\_\_\_ EMAIL: \_\_\_\_\_

Type of work you would like to do. (See other side for ideas), or site where you volunteer  
\_\_\_\_\_

Geographic preference: \_\_\_\_\_

Are you interested in being on our special list for one-time volunteer opportunities?

YES \_\_\_\_\_ NO \_\_\_\_\_

Will you drive to and from your volunteer activities? YES \_\_\_\_\_ NO \_\_\_\_\_ If yes, please fill out the information below for insurance purposes.

**RSVP VOLUNTEER INSURANCE STATEMENT:** I will keep in effect auto insurance equal to or greater than the minimum required by the State of Washington or by the state where my auto is insured.

Drivers License Number: \_\_\_\_\_

Beneficiary for RSVP Accident Insurance:  
\_\_\_\_\_

Relationship to Beneficiary: \_\_\_\_\_

Phone: \_\_\_\_\_

Address of Beneficiary: \_\_\_\_\_

For Statistical Purposes Only			
Ethnicity		Gender	
African American	_____	American Indian	_____
Asian American	_____	European American	_____
Hispanic American	_____	Pacific Islander	_____
		Male	_____
		Female	_____

\_\_\_\_\_  
**Volunteer Signature - REQUIRED**

\_\_\_\_\_  
**Date**

*Please complete other side*

Have you volunteered with RSVP before? No \_\_\_\_ Yes \_\_\_\_ (where and when?)

Describe your past occupation or volunteer experience

How did you hear about RSVP?

Physical/Medical limitations?

**Please circle your top 5 choices for a volunteer position**

<b>ADMIN/MANAGEMENT</b> Accounting/Bookkeeping Data Entry Clerical Reception Computer	<b>COMMUNICATIONS</b> Media Newsletters/Publications Public Speaking Public Relations Marketing	<b>HEALTH/NUTRITION</b> Hospital//Clinic Food Banks/Gleaning Family Planning Meals on Wheels Congregate Meals Health Education	<b>PUBLIC SAFETY</b> Community Policing Homeland Security Disaster Preparedness Probation Services
<b>EVENTS</b> Outdoors Fairs & Festivals Fundraising Intergenerational	<b>ARTS/ENTERTAINMENT</b> Chorus/Choir Musician Theater Artist Museums Games	<b>EDUCATION</b> Preschool/Day Care Elementary Secondary Adult Ed/Literacy Library ESL	<b>SENIORS</b> Senior Centers Adult Day Programs Companionship Computer instruction
<b>LEADERSHIP</b> Board of Directors Committees Advisory Board Community Development Management Consulting Social Services Planning	<b>COMMUNITY DEVELOPMENT</b> Consumer Education Thrift /Gift Store Community Planning Community Gardens Volunteer Management	<b>COUNSELOR/MENTOR</b> Peer Youth Loss Mental Health Family/Caregiver	<b>CRAFTS/HOBBIES</b> Knit/crochet Carpentry Photography Craft instruction Restoration
<b>ENVIRONMENT</b> Wilderness Preservation Clean Air & Water Recycling Animals Refugee Assistance	<b>HUMAN NEEDS</b> Homelessness Family Support Crisis Intervention Housing/Rehab	<b>OTHER</b> _____ _____ _____	

**PLEASE RETURN THIS FORM TO RSVP  
OR THE COORDINATOR AT YOUR SITE**

**King County RSVP  
1501 North 45<sup>th</sup> St.  
Seattle, WA 98103**

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