

## Group Volunteer Profile

**Today's Date** \_\_\_\_\_  
Name of Group/Organization \_\_\_\_\_  
Name of Group Coordinator \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Number of group members: \_\_\_\_\_ Ages of group members: \_\_\_\_\_  
How did you hear of AFAC? \_\_\_\_\_

**Areas of Interest** (please check all that apply)

- Warehouse (sorting, packing & bagging food)
- Special Events
- Cleaning
- Gardening (Plant-a-row)
- Gleaning (harvesting produce from area farms)
- Food drive
- Purchasing and packing Emergency Food Kits off-site

**Physical limitations** – Much of our work involves lifting and standing. Do any of your group members have any limitations or concerns about which we should know?

\_\_\_\_\_

**Availability** (please check all that apply)

- Monday  Tuesday  Wednesday  Saturday  Sunday
- One time project  Monthly or on-going project

If any group members are under the age of 18, AFAC requires a signed Minor Hold Harmless form which can be found at the very bottom of the home page of our website, [www.afacinfo.org](http://www.afacinfo.org).

After you complete this form, save it to your hard drive. Then you can return it to the Volunteer Department by email at [volunteer4afac@aol.com](mailto:volunteer4afac@aol.com) or by fax at 703-845-8491. Someone from the Volunteer Department will contact you. Thanks for your interest in helping fight hunger in Arlington.

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**For office use**

Assignment \_\_\_\_\_ Date \_\_\_\_\_