

## Volunteer Application for MURRAY THERAPY

We at Murray Therapy expect each volunteer to commit to at least 25 hours. *All volunteers must sign a HIPAA consent form.* The dress code is casual (no holes in jeans) and closed toe shoes.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

What is the best way to contact you?  Phone  Email

Student: Y or N Where: \_\_\_\_\_ Employed: Y or N Where: \_\_\_\_\_

What makes you interested in volunteering at Murray Therapy? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any past experience with children? If so, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What days and times are you available?

\_\_\_\_\_  
\_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					