



Volunteer Group Request Form

Date_____

Business Name_____

Address_____ City_____ Zip_____

Contact Name_____

Phone_____ Cell_____

Email Address_____

Volunteer at: ReStore___ Construction___ Special Project___ Any___

Date of Service_____ Time frame of Service_____

Total Number of Volunteers_____ Over 16_____ 16 & under_____

Skilled Volunteers #_____ Unskilled Volunteers # _____

Lunch Plan: Group bringing sack lunch_____ Eating off site_____

Business Donor: Yes_____ No_____ Amount \$_____

Special needs or instructions:

Email your completed form to bjackson@bendhabitat.org or Fax 541-598-3041
Questions or need more information contact Brenda Jackson at 541-312-6709 or bjackson@bendhabitat.org