

CONTRA COSTA COUNTY PUBLIC HEALTH HOMELESS PROGRAM
PROJECT HOMELESS CONNECT 4
WEST COUNTY

COMMUNITY VOLUNTEER FORM

We need your help!

Donate your time for a one-day/one-stop shop to offer a variety of services to people experiencing homelessness; connecting them with benefits, medical care, substance abuse and mental health counseling, social services, housing and shelter.

Full Name:

Mailing Address:

City & Zip:

Home Phone:

Cell Phone:

e-mail address:

How did you hear about this event?

Did you participate in Project Homeless Connect 3 (September 10, 2008)? yes no

Are you coming on behalf of (please check all that apply):

County Other affiliation (faith/non-profit/service club) _____
 None

Availability (check all that apply):

- 2:00pm - 6:00pm specifically for setup day-before-event (**June 16th**)
- 7:00am - 1:00pm (specifically for volunteer check-in table, June 17th)
- 7:15am - 12:30pm
- 12:15pm - 4:00pm

Which volunteer position(s) are you interested in (check all that apply)?

- Set up day before event (June 16th)
- Volunteer Check-in (must arrive early: 7:00am - 1:00pm)
- Translation - Language(s): _____
- Ambassador
- Food Services
- Do you have any limitations that must be considered (please list):

Thank you for your interest and your generosity!

Please fax this form to: 925-313-6761 or
email to: projecthomelessconnect@hsd.cccounty.us