

The Rouse Home  
Youth Volunteer Application/Registration

Name \_\_\_\_\_ Birthday \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_

In case of emergency notify \_\_\_\_\_

Telephone \_\_\_\_\_

Your Home School \_\_\_\_\_

Interests or Hobbies \_\_\_\_\_

\_\_\_\_\_

Have You Volunteered Before? \_\_\_\_\_

What Did You Do? \_\_\_\_\_

\_\_\_\_\_

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PARENT CONSENT FORM

I, \_\_\_\_\_ give my permission for my child \_\_\_\_\_

\_\_\_\_\_ to volunteer at the Rouse Home.

Signature \_\_\_\_\_ Date \_\_\_\_\_