PO Box 116 111 James Street Milford, IN 46542 (260) 361-1441 info@milfordfoodbank.org



"For I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me"

Matthew 25:35

VOLUNTEER APPLICATION

				Date
Name				
Addre	SS			
City _		State	Zip Code	
Phone	Number			
Email	Address			
Emerg	gency Contact	: Information:		
Name			Relationship	
Phone	Number			
Do you have any allergies or health restrictions?			□ Yes	□ No
If Yes, please explain:				
Availability for Volunteering:				
Please check all that apply:				
0	Mondays	7:30 am - 12:00 pm (pantry distribution)		
0	Fridays	7:30 am - 12:00 pm (pantry distribution)		
0	Mondays	1:00 pm - 4:00 pm (packaging)		
0	Thursdays	8:30 am - 12:00 pm (packaging)		
Do you have experience operating a lift truck?				□ No
Do yo	u have experie	ence using pallet jacks?	□ Yes	□ No