



GROUP VOLUNTEER INTEREST FORM

Group Name: _____

Mailing Address: _____

City, ST & Zip: _____

Contact Person: _____ Phone: _____

Contact Person Email: _____

Please choose a category that best describes your group:

- Business/Corporate
- Faith Based Organization
- School Class or Club (Name of School: _____)
- Family
- Association

Approximately how many people are in your group? _____

Will there be individuals under the age of 18? Yes No

Note: volunteers must be at least 15 years old and should have adult supervision if on the TNF campus

What is the purpose of your group volunteer project?

- Educational
- Community Service
- Team Building
- Annual Service Project

Please list any items you'd like us to know about your group or the volunteer activity:

What type of volunteer project is your group interested in?

- Beautification
- Adopt-A-Room
- Donation Drive
- Other _____

Some projects require supplies or materials. Will your group be able to cover the cost of items needed to complete the project? Yes No

What date or dates is your group looking to complete the project? _____

Business/Corporate Groups Only

Are there grant opportunities or Employee Giving/Matching programs at your company?

- Yes
- No
- Not Sure

Please return this form by email to Michelle Peralta at development@thenewfoundation.org. After your form is received, you'll be contacted to discuss your groups' interest. Thank you! www.thenewfoundation.org