

**Application for Volunteer Service**

We appreciate your interest in volunteering at Three Pillars Senior Living Communities. Your time can make a positive impact in the lives of our residents! Please complete and return this entire application and background check form via email: [volunteers@threepillars.org](mailto:volunteers@threepillars.org) or mail: **Volunteer Coordinator**, 365 Sunset Drive, Dousman, WI 53118. *Thank you and we look forward to hearing from you!*

**Personal Information**

Name: (Last/First/Middle): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternative Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Birthdate: \_\_\_\_\_

**Emergency Contact**

*In case of an emergency, notify:*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternative Phone Number: \_\_\_\_\_

**List Times Available**

DAYS	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

**VOLUNTEER AGREEMENT**

I CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE AND MAY BE INVESTIGATED. I understand that if in the judgment of Three Pillars, any information has been misrepresented, falsified, or omitted, any offer of volunteer assignments may be withdrawn without obligation or liability on the part of Three Pillars. I release from any and all liability all representatives of Three Pillars for their acts in good faith in connection with evaluating my application.

Volunteer Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(typed or written)*