

AVAILABILITY - Check day of week or month, and hour, you can teach, direct or supervise an activity.

<u>DAY</u>						<u>HOW OFTEN</u>	<u>TIME</u>
M	T	W	Th	F	S	Weekly (once, twice etc) _____	Morning _____
						Monthly (" " " _____	Afternoon _____
						Other _____	

Maximum number you prefer in your group or activity _____ With what age group _____ and sex _____ do you prefer to work?

Please indicate on reverse side, names of others who might be interested in serving their community.

NAME _____ ADDRESS _____ PHONE _____

PLEASE RETURN THIS FORM TO OSSIE DALZELL

You need not be highly skilled in an activity in order to serve as a volunteer. The essential requirements are an interest in the activity or program. Please check any of the following which you would like to teach or supervise.

<u>ATHLETICS</u>	<u>CLUBS</u>	<u>CRAFTS</u>	<u>DANCING</u>
Baseball _____	Girl Guides _____	Paper _____	Folk _____
Bowling _____	Brownies _____	Wood _____	Square _____
Tennis _____	Camp Fire Girls _____	Metal _____	Tap _____
Swimming _____	Garden Clubs _____	Oil Painting _____	Ballet _____
Softball _____	Others _____	Water Colors _____	Modern _____
Volleyball _____		Drawings _____	
		Stencilling _____	<u>HOBBIES</u>
		Block Printing _____	Photography _____
<u>DRAMATICS</u>	<u>HOME ARTS</u>	Leather Work _____	Stamp Collecting _____
Stagecraft _____	Cooking _____	Sewing _____	Coins _____
Direction _____	Decorating _____	Others _____	Flowers _____
Acting _____	Others _____		Insects _____
Puppetry _____			Others _____
Marionettes _____	<u>OUTDOORS</u>	<u>SOCIAL ACTIVITIES</u>	
	Camping _____	Dances _____	
<u>MUSIC</u>	Cooking _____	Parties _____	
Group Singing _____	Bicycling _____	Picnics _____	
Choral Groups _____	Bait Casting _____	Tours _____	
	Fly Casting _____	Storytelling _____	
	Hunting _____	Cards _____	
	Hiking _____		
	Nature Lore _____		