



# Volunteer Request Form

Thank you for volunteer request! Please fill out the top section of this form and send it via email to [ahurt@cityofmitchell.org](mailto:ahurt@cityofmitchell.org). We will try our best to fill your request from our volunteer database. **Any changes to your volunteer request will require the agency to fill out an updated form.**

Agency: \_\_\_\_\_ Date: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name/Type of Event: \_\_\_\_\_  
 Event Date: \_\_\_\_\_ Event Time: \_\_\_\_\_  
 Event Location: \_\_\_\_\_  
 # of Volunteers Needed: \_\_\_\_\_  
 Description of Volunteer Duties: \_\_\_\_\_

### Office Use Only

Agency MOU Complete: Yes  No   
 Volunteers Contacted Via: Phone  Email   
 Date Volunteers Contacted: \_\_\_\_\_  
 # of Volunteers Secured: \_\_\_\_\_

Volunteer Names (use back of form if needed):

1		8	
2		9	
3		10	
4		11	
5		12	
6		13	
7		14	

Date Confirmation Sent to Agency Contact: \_\_\_\_\_ Email  Phone

Reminder Call to Volunteers Needed: Yes  No  Date of Call: \_\_\_\_\_