ASHA-RAY OF HOPE VOLUNTEER REGISTRATION FORM

If you are interested in donating few hours of your time as a volunteer for a worthy cause, why not do it for Domestic Violence cause. Please check the following areas of interest and return completed form to: ASHA-Ray of Hope, 4900 Reed Road, Suite 300, Columbus, OH 43220 or simply complete the form below and email it to www.asharayofhope@sbcglobal.net.

First Name: ___________________________; Last Name: ________________________________

Tel. No: (    ) _____________________, Cell No: (    ) ____________________________

Email: ___________________________ Street Address & Zip Code: ____________________________

Days Available to volunteer:
___Monday ___Tuesday ___Wednesday ____Thursday ___Friday ___Saturday ___Sunday

You’re available time to volunteer: _____Morning _____Afternoon _____Evening

Number of hours/per week you are available: ____________ Hours/per week

Areas of Interest to volunteer (check all that apply):

- Can be an Interpreter for individuals from:
  ___Nepal  ___ Bangladesh  ___Gujarat  ___Punjab  ___Andhra Pradesh

- Client Advocate (Requires 45 hours of training) ______

- Outreach and Fund Raising Events ______

- Client Transportation ______

- Client Resources ______

- Office Administration ______

Other: ________________________________________________________________

If you are unsure of making a commitment at this time to volunteer, we hope you will become a member of our organization to support ASHA’s work in the community. To know more about ASHA and become a member call our office at 614-326-2121 or log on to our website www.asharayofhope.org. We look forward to your participation in this worthy cause.