



OCC Sign-Up & Confirmaton
Return this form by the 10th of the month to:
lorrainej david@verizon.net

or mail to
Volunteer Program
777 N.E. MLK Jr. Blvd.
Portland, OR 97232
Fax 503-731-7884

Volunteers:

You are scheduled for the following shifts. Please remember to arrive **15 minutes before** your shift begins and plan to stay your entire time. Remember to record your hours in the book behind the VIC. **If you have any questions when you are volunteering or need to change your scheduled time, please call *Lorraine Davidson at 503-649-2948***

NAME _____

Home phn _____ Work phone _____

email address _____

PLEASE COMPLETE ALL FOUR CHOICES and CIRCLE THE APPROPRIATE INFORMATION

The number of times I will be available this month: 1 2 3 4

My choices are:

First choice: Date: _____ Day _____ Arrival time: _____

Person working with you _____

Second choice: Date: _____ Day _____ Arrival time: _____

Person working with you _____

Third choice: Date: _____ Day _____ Arrival time: _____

Person working with you _____

Fourth choice: Date: _____ Day _____ Arrival time: _____

Person working with you _____