



# VOLUNTEER FORM

Thank you for your interest in joining our "CAP CIRCLE OF FRIENDS"! As a 501(C)(3) Non-Profit Organization, the Front Range Center for Assault Prevention has a number of volunteer opportunities.

**Please fill out the form and send it to :**

Victoria Strong, Executive Director  
Address: 7878 W. 80th Place, Suite 1-I Arvada CO 80005

**NAME:** \_\_\_\_\_

**ADDRESS:**

Number / Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

**TELEPHONE:**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Email Address: \_\_\_\_\_

**BIRTHDATE:** \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_ **OCCUPATION:** \_\_\_\_\_

**HAVE YOU PREVIOUSLY WORKED AS A VOLUNTEER:** Yes No

**IF YES, WHICH AGENCIES?** \_\_\_\_\_

**REASON FOR VOLUNTEERING:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Do you agree to a background check?** Yes No

**Have you been convicted of a misdemeanor or a felony?** If so, which? \_\_\_\_\_ When? \_\_\_\_\_

**SIGNED** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*safe • strong • free*