



295 Walnut Street
Elizabeth, NJ 07201-1105
1-800-736-2773

THE RELIEF BUS www.reliefbus.org VOLUNTEER APPLICATION

(please print very clearly)

Check if this is your first time volunteering

DATE(S) OF OUTREACH: _____ AGE: _____

NAME: _____

ADDRESS: _____ APT# _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

FACEBOOK PROFILE NAME: www.facebook.com/_____

TWITTER PROFILE NAME: www.twitter.com/_____

DRESS CODE: *It is important to dress modestly and wear weather appropriate clothing. DO NOT wear open toed shoes, short shorts, bare midriffs, tight clothing, tank tops, clothing with vulgar or explicit messages, clothes advertising drugs/alcohol, or wear expensive clothes/jewelry.*

Church you attend (if applicable): _____

How did you hear about The Relief Bus?: _____

Check this box if you **do not** want to receive The Relief Bus newsletter:

Please **circle** any areas you would be interested in volunteering in the future?:

Relief Bus Short-term Missions Receptionist Construction

Bus Driver Data Entry Other: _____

Thank you for your willingness to serve God with us today!
Please ensure the completed application is returned to the Volunteer Coordinator and signed 3 days prior to your outreach date!

RELEASE FORM

I hereby grant New York City Relief (NYCR) - The Relief Bus, the full right to use my participation in NYCR in part or in full, audio, video, published and/or produced in any form, in any way that NYCR deems useful.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____

IF YOU ARE UNDER THE AGE OF 18 YOU MUST HAVE A PARENT OR LEGAL GUARDIAN SIGN AND AGREE TO THE ABOVE RELEASE FORM. THANK YOU.

PARENT OR LEGAL GUARDIAN SIGNATURE: _____

PRINT NAME: _____ DATE: _____

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