

BATTLE CREEK COMMUNITY FOUNDATION  
AND ITS SUBSIDIARIES



## Ambassador Volunteer Information Form

VOLUNTEER INFORMATION (PLEASE PRINT LEGIBLY)			
Last Name	First	M.I.	Date
Street Address		Apartment/ Unit #	
City	State	ZIP	
Home Phone	Cell Phone		
Email address	Preferred method of contact		
Are you interested in volunteering at a special event hosted by Community Foundation?			
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Are you interested in volunteering at the Community Foundation Office?			
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Are you interested in serving on one of the Community Foundation Committees?			
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Other comments regarding your interest:			
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Signature		Date	

You will be contacted within one week of receipt. Please indicate the best time/method to reach you.