



# 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 our Executive Director:**

Front Range CAP  
ATTN: Victoria Strong  
P.O. Box 745727  
Arvada, CO 80006

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

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**TELEPHONE:** Home: \_\_\_\_\_ Work: \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_ **BIRTHDATE:** \_\_\_\_\_

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

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

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

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

**AREAS OF INTEREST FOR VOLUNTEERING:** \_\_\_\_\_

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

**Been convicted of a misdemeanor or a felony?** If so, which? \_\_\_\_\_ When? \_\_\_\_\_

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

*safe • strong • free*