

# THE PEACE CENTER

## Volunteer Form

Date: \_\_\_\_\_

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Telephone, Day \_\_\_\_\_ Eve \_\_\_\_\_

e-mail \_\_\_\_\_

School/Job \_\_\_\_\_

Days and Time available

Why would you like to volunteer at The Peace Center?

Do you have previous volunteer experience?  No  Yes, please describe:

Other experiences/skills/talents that will be useful here?

What are you interested in helping with?

How did you hear about The Peace Center?

Please mail completed form to:

The Peace Center  
102 W. Maple Ave.  
Langhorne, PA 19047-2820