

# ASPIRE VOLUNTEER FORM

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

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

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

PHONE (Day): \_\_\_\_\_ PHONE (Night/Weekend): \_\_\_\_\_

EMAIL: \_\_\_\_\_

**YES!** I am interested in volunteering my time to help ASPIRE in the following areas: *(check all that apply)*

**SOCIAL PROGRAMS**

**SPORTS & FITNESS**

**SPECIAL OLYMPICS**

**OTHER** *(please specify below)*

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## WHAT IS YOUR AVAILABILITY? *(check all that apply)*

**Weekdays**    Mon    Tues    Wed    Thu    Fri    Times: \_\_\_\_\_am    \_\_\_\_\_pm

**Evenings**    Mon    Tues    Wed    Thu    Fri    Times: \_\_\_\_\_am    \_\_\_\_\_pm

**Weekends**    Mon    Tues    Wed    Thu    Fri    Times: \_\_\_\_\_am    \_\_\_\_\_pm

**PLEASE SELECT "FILE" & EMAIL COMPLETED FORM TO:**

**TOM.MCPIKE@ROCKDALECOUNTY.ORG**

**OR MAIL TO:**

Tom McPike, C.T.R.S.

Therapeutic Recreation

Rockdale County Parks and Recreation

P.O. Box 224

Conyers, GA. 30012

**PHONE: 770-278-7249**