



Application for New Volunteer Member

Please print clearly

First Name: _____ Last Name _____

Address: _____

Home Tel: _____ Cell: _____

E-Mail: _____

Emergency Contact Name: _____ Tel: _____

References: Please provide us with the contact information of at least one reference from a prior job or volunteer experience. The reference may also be a current volunteer member.

1. Name: _____ Contact # _____ Association: _____

2. Name: _____ Contact # _____ Association: _____

Please indicate which RTS store departments may interest you:

Please tell us about yourself; past employment, volunteer experience, leadership roles, etc.:

Are you at least 18 years old? Yes No

Do you have a resale business? Yes No

Do you have any special skills or talents? (Examples graphic designer, writer, crafter, web skills, antiquer, etc.)

What days and hours are best for you to volunteer?

Monday AM PM Tuesday AM PM

Wednesday AM PM Thursday AM PM

Friday AM PM Saturday AM PM

Sunday AM PM

What other places are you a volunteer and in what capacity?

1. Place: _____ Capacity# _____

2. Place: _____ Capacity# _____

I would like to join the Ridgefield Thrift Shop. I am volunteering without promise or expectation of any compensation.

Signature of prospective volunteer: _____ Date: _____

Please return to the Attn: Annette Robertson at the address below and she will be in-touch with you or email info@ridgefieldthriftshop.com