

Volunteer Information Form

Date: _____

Name		Phone (preferred)	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work				
Address							
City		State	Zip Code				
E-mail			Birthday (Month/Day)				
Employer & Occupation						<input type="checkbox"/> Active <input type="checkbox"/> Retired	
Emergency Contact							
Name		Relationship	Phone				
Personal background, professional experience or items of interest							
Volunteer Interest <input type="checkbox"/> Reader <input type="checkbox"/> Admin Support <input type="checkbox"/> Operations Support <input type="checkbox"/> Outreach							
How many hours could you give per week or per month?						<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	
Do you have the ability to record from home rather than from our Studios - - or would you like to learn how? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I need more information about this							
What days and times are you available for in-studio reading and recording? (Please circle) (We typically schedule 90 minutes shifts for 60 minutes of reading to allow for breaks and pauses)	Sunday	7:30a	9:00a	10:30a			
	Monday	7:30a	9:00a	10:30a	Noon	1:30p	2:00p
	Tuesday	7:30a	9:00a	10:30a	Noon	1:30p	2:00p
	Wednesday	7:30a	9:00a	10:30a	Noon	1:30p	2:00p
	Thursday	7:30a	9:00a	10:30a	Noon	1:30p	2:00p
	Friday	7:30a	9:00a	10:30a	Noon		
What types of reading material do you enjoy? <input type="checkbox"/> Books, fiction <input type="checkbox"/> Books, non-fiction <input type="checkbox"/> Newspapers <input type="checkbox"/> Magazines <input type="checkbox"/> Other _____							
What newspapers and/or magazines do you already subscribe to?							

Do you have a geographical preference for the source of newspapers or other materials you might read?

- Buffalo Metro Rochester Metro Town/Village _____ Other _____
- County (Please check preferred county or counties)
- Erie Monroe Allegany Cattaraugus Chautauqua Chemung Genesee Livingston
- Niagara Ontario Orleans Schuyler Steuben Wayne Wyoming Yates

How do you read? (Check all that apply)

- Paper Digital E-reader Kindle iPad Amazon Fire Other tablet or device
- Audio CD or DVD Audible.com Podcast(s) Other audio device

Do you have a current library card? Yes No

Other comments or information you would like us to know.

How did you hear about the Niagara Frontier Radio Reading Service?