



Volunteer Registration Form

“Working today for a Brighter Tomorrow.”

820 N.E. 63rd Street

Oklahoma City, OK 73105

Phone: 405-843-HOPE (4673) Fax: 405-843-4392

E-mail: nthomason@okbtf.org Website: www.okbtf.org

Please complete all areas and return this form to the above address. All information is solely for the OKBTF office use and remains strictly confidential.

Name: _____

Mailing Address: _____
(Street) (City) (Zip Code)

Telephone Numbers: Home _____ Work _____

Cell Phone/Pager: _____ E-mail Address: _____

Date of Birth: _____ Gender: Male Female

Driver’s License Number: _____

Physical Limitations: _____

Please note: You are not obligated to disclose your ethnicity or marital status. We request this information only to help us know you better and to determine compliance with federal civil rights laws.

- | | | |
|------------|--|--|
| Ethnicity: | <input type="checkbox"/> American Indian/Alaskan | <input type="checkbox"/> Asian/Pacific Islander |
| | <input type="checkbox"/> African American | <input type="checkbox"/> Hispanic |
| | <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> I prefer not to respond |

Previous Occupation and Employer: _____

Educational Background: _____

How did you hear about OKBTF? (If from a friend please tell us their name):

Spouse’s Name: _____ Anniversary Date: _____

All OKBTF Volunteers will receive FREE accident insurance. Who would you like to designate as your beneficiary?

Name: _____ Relationship: _____ Phone#: _____

Please list two (2) LOCAL persons we should call in the event of an emergency:

Name: _____ Relationship: _____ Phone#: _____

Name: _____ Relationship: _____ Phone#: _____

Current civic/community/volunteer involvement: _____

In which areas of Oklahoma do you wish to volunteer? (Please check all that apply)

- | | | | |
|---|--|--|-----------------------------------|
| <input type="checkbox"/> North OKC | <input type="checkbox"/> South OKC | <input type="checkbox"/> East OKC | <input type="checkbox"/> West OKC |
| <input type="checkbox"/> Central OKC | <input type="checkbox"/> Edmond | <input type="checkbox"/> Bethany | <input type="checkbox"/> Mid-Del |
| <input type="checkbox"/> Choctaw/Harrah | <input type="checkbox"/> Spencer/Jones | <input type="checkbox"/> No Preference | <input type="checkbox"/> Tulsa |

The following information will be used to match you with volunteer opportunities. Please check as many areas of interest as you like, But ONLY those in which you are willing to serve as a volunteer.

- | | | |
|--|---|---|
| <input type="checkbox"/> Bulk Mail/Zip Coding | <input type="checkbox"/> Food/ Nutrition | <input type="checkbox"/> Office Help |
| <input type="checkbox"/> Carpentry/Woodwork | <input type="checkbox"/> Friendly Visitation | <input type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Child Advocacy | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Serve as a Board Member |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Health/Fitness | <input type="checkbox"/> Special Projects |
| <input type="checkbox"/> Companionship/Outreach | <input type="checkbox"/> Hospice/Terminally III | <input type="checkbox"/> Tutoring Adults |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Hospice/ Medical | <input type="checkbox"/> Tutoring Children |
| <input type="checkbox"/> Computer Instruction | <input type="checkbox"/> Infant/Child Care | <input type="checkbox"/> Work at Festivals / Events |
| <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Information Desk | |
| <input type="checkbox"/> Computer Repair | <input type="checkbox"/> Insurance | |
| <input type="checkbox"/> Consult/ Evaluate | <input type="checkbox"/> Interpreter: _____ | |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Legal Counseling | |
| <input type="checkbox"/> Driving | <input type="checkbox"/> Mentoring | |
| <input type="checkbox"/> Education | <input type="checkbox"/> Nursing Homes | |
| <input type="checkbox"/> Entertainment | <input type="checkbox"/> Outdoor Activities | |
| <input type="checkbox"/> Other (please specify): _____ | | |

Your special talents /skills: _____

Anything else you would like us to know about you? _____

“I understand that the Oklahoma Brain Tumor Foundation may, at their own expense and discretion, choose to perform confidential background checks on any/all registered volunteers. I hereby give my permission for such checks to occur.”

Sign: _____ Date: _____

OKBTF Use:

Entered in Data Base: _____