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| Children’s Hope IndiaCH3 New Member Application 2017 | C:\Users\MRJanus\Desktop\CHLOGO_Color-1.jpg |

## CH3 Member Requirements

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| 1. Attend 2 mandatory meetings each year |
| 2. At least 2 fundraisers must be attended each year (the walk-a-thon is mandatory) |
| 3. Help to coordinate or organize an event/fundraiser |
| 4. Respond to all emails in a timely manner |
| 5. Bring at least 2-3 friends to the walk-a-thon and one other event each year |

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Age |  |
| School |  |
| Mobile Phone |  |
| E-Mail Address |  |

## Why Interested?

### Why would you like to be involved in CH3 and what do you feel you can gain from the experience?

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## Specific Interest?

### In what way would you like to be involved in CH3? What areas/projects/events of CH3 are you specifically interested in?

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## Other Clubs?

### What other clubs/organizations are you involved in? What is your position?

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## Requirements?

### The requirements of a CH3 member are listed above. Do you think you can fulfill those requirements?

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## Person to Notify in Case of Emergency

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| --- | --- |
| Name/Relationship |  |
| Street Address |  |
| City ST ZIP Code |  |
| Home Phone |  |
| Work Phone |  |
| Mobile Phone |  |
| E-Mail Address |  |

## Agreement and Signature

### By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

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| --- | --- |
| Name (printed) |  |
| Signature |  |
| Parent’s Name (if under 18) |  |
| Parent’s Signature (if under 18) |  |
| Date |  |

## Our Policy

### It is the policy of Children’s Hope India to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

### Thank you for completing this application form and for your interest in volunteering with us.

We will contact you shortly to match your interests with our needs.

Please fill up the form and email it to [karen@childrenshopeindia.org](mailto:karen@childrenshopeindia.org)