

Volunteer Application



Volunteer Work Schedule

- One day, every other week
- Either 9:45am - 3:15pm, Monday - Saturday

Name		Date of Application	
Physical Address			
Mailing Address:			
Email:			
Home Phone #:		Cell Phone #:	
Years in Roaring Fork Valley:		Birth Date: (Month & Date Only)	

Check mark potential days that work best for you?							
<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Occasional Sunday	

Availability:	<input type="checkbox"/> Year Round	<input type="checkbox"/> Summer	<input type="checkbox"/> Winter
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Please give a brief explanation as to why you want to be a Thrift Shop volunteer.

Please list past volunteer experiences.

Please list any Thrift Shop Volunteers you know.	Special Skills:

References (two please):	Phone # of References

Short paragraph about yourself:

Return Application to:
E-mail: volunteer@aspenthriftshop.org Or mail to: Thrift Shop of Aspen, P.O. Box 126, Aspen, Co. 81612
Questions: Call Peggy at 970-925-4308, or Helen at 970-925-6557. You will be contacted and thank you for your interest.