

Volunteer Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

I would like to receive AOLC's newsletter by postal mail.

Home Phone: _____ Cell Phone: _____ Work Phone: _____

I would like to receive AOLC's e-newsletter.

Email: _____

Church Attending: _____

I am interested in volunteering in the following area(s):

- Intercessory Prayer
- Office/Clerical Support
- Receptionist/Phone Consultant
- Client Peer Counseling/Class Instructor
- Abortion Recovery Peer Counseling/Support Group Facilitator
- Helper in Sarah Elizabeth's Closet (Material Assistance department)
- Helping Hearts Heal Program/Life Skills Development Peer Advocate
- Library Assistance
- Bible Study Facilitator
- Men's Ministry
- Professional Services
- Fundraising Committee Annual Spelling Bee Committee Grant Writing/Research
- Church Liaison Baby Bottle Boomerang Baby Shower Spelling Bee Team
- Community Liaison Stand for Life Rep. Public Presenter
- Facility Maintenance/Grounds Care
- Where needed most
- Financial Giving

Please complete and return to:

Client Services Director, Alpha-Omega Life Center, PO Box 291832, Kerrville, TX 78029