



### *Volunteer Contact Information*

Name:
*E-mail Address:
*Phone Number:
*Please let us know your preferred method for communications.
College/University:
Means of Transportation to ACLAMO:
Start Date:
End Date:
Breaks (if you are coming from a college/University):
Day(s) Volunteering at ACLAMO:
Emergency Contact Information Name:
Relationship:
Phone number:

The above information is being requested in the event that we need to inform you of a change in the schedule (i.e., program closure due to inclement weather).

*ACLAMO builds a stronger community one child and one family at a time*

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[www.aclamo.org](http://www.aclamo.org)