

APFY Volunteer Application



220 3rd Ave SE Pine City, MN 55063

_____	_____
Full Name	Home/Cell Phone #
_____	_____
Street Address	Email Address
_____	_____
City/State/Zip	Date of Birth

Volunteer Interests

Front Desk Teach a Class (Topic) _____

*Driving Residents Other _____

*If your interest is in Driving, we need the following information:

APFY Volunteer Application (continued)

Vehicle Make _____ Model _____

License Plate # _____ Driver's License# _____

Auto Insurance Co. _____ Policy# _____

(Prior to driving, we will need a copy of your driver's license and insurance card for our records)

Thank you for your interest in Volunteering with APFY!