

VOLUNTEER INFORMATION

Name _____ Day phone _____

Address _____ Evening phone _____

City _____ State _____ Zip _____

Email _____ Date _____

AVAILABILITY, SKILLS, AND INTERESTS

Number of hours available (approximate):

Per month _____ Per week _____ Per day _____

Volunteer day preference Weekdays Weekends

Please list some of your skills, education, hobbies and experiences: _____

There are many ways to become involved. Please check all that might interest you.

- | | |
|---|---|
| <input type="checkbox"/> Field projects | <input type="checkbox"/> Committee work |
| <input type="checkbox"/> Bird surveys | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Nest box monitoring | <input type="checkbox"/> Videography |
| <input type="checkbox"/> Nest box construction | <input type="checkbox"/> Newsletter – editing and writing |
| <input type="checkbox"/> Field trips | <input type="checkbox"/> Kids and education |
| <input type="checkbox"/> Birders night co-planning | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Festivals and special events | <input type="checkbox"/> Communication |
| | <input type="checkbox"/> Fundraising |

Are you currently a member of ECAS? Yes No

If you are not currently a member, may we send you an enrollment form? _____

How did you hear about volunteering at ECAS?

ECAS website Friend/volunteer volunteerconnectnow.org
 ECAS newsletter Newspaper other _____

Please return completed form to: ECAS, P.O. Box 565, Bend, OR 97709, or email to Mardi Jensen:
donmardi@bendbroadband.com