

## Member Registration Form

<b>PERSONAL INFORMATION:</b>		
First Name:	Last Name:	Middle Initial:
Street Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:
Email:		

1. What interests you the most about being a part of The Cheer Guild?

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2. What type of general opportunities are you interested in? Check all that apply.

<input type="checkbox"/> Volunteer in the hospital	<input type="checkbox"/> Become a Cheer Guild member	<input type="checkbox"/> Start a new chapter
<input type="checkbox"/> Join an existing chapter	<input type="checkbox"/> Join a committee	<input type="checkbox"/> Become a Board Member

3. As a part of The Cheer Guild, what are some of the skills / experiences that you will bring to our non-profit organization?

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4. When are you available to help?

Please let us know when you are available to volunteer by completing the table below. Write in the time ranges that you can volunteer during the week (include AM and PM). For example, if you are available from 11 a.m. to 9p.m. on Thursday, you would write 11am-9pm under Thursday.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

How many hours per week are you willing to volunteer? \_\_\_\_\_ Hours

(Turn Over)

I am interested in volunteering in the hospital. If yes, indicate your top choices by marking (1) next to your first choice, (2) next to your second choice, etc. below.

<input type="checkbox"/> Toy Room	<input type="checkbox"/> Fundraising Sales
<input type="checkbox"/> Gift Shop	<input type="checkbox"/> Office Assistance
<input type="checkbox"/> Family Cart	<input type="checkbox"/> Other

I am interested in becoming a member of a Cheer Guild committee. If yes, indicate your top choices below by marking (1) next to your first choice, (2) next to your second choice, etc. below.

<input type="checkbox"/> Finance/Accounting	<input type="checkbox"/> Strategic Planning
<input type="checkbox"/> Investment	<input type="checkbox"/> Public Relations/Speakers Bureau
<input type="checkbox"/> Legal/Governance	<input type="checkbox"/> Member & Donor Relations
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Publications
<input type="checkbox"/> Recruitment	<input type="checkbox"/> Toy Room
<input type="checkbox"/> Retail—increase profit margins	

I am interested in becoming a Cheer Guild Board Member. If yes, please indicate which positions you are interested in learning more about.

<input type="checkbox"/> Secretary	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Treasurer	<input type="checkbox"/> Historian/Telephone Cheer
<input type="checkbox"/> Toy Room	<input type="checkbox"/> Hospitality
<input type="checkbox"/> Member/Donor Relations	<input type="checkbox"/> Volunteer Liaison/Recruitment
<input type="checkbox"/> Public Relations	<input type="checkbox"/> Legislation
<input type="checkbox"/> Publications	<input type="checkbox"/> Parliamentarian
<input type="checkbox"/> IU Liaison	

5. Is there anything else you want us to know?

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Is it o.k. for a representative of The Cheer Guild to contact you moving forward?

<input type="radio"/> Yes	<input type="radio"/> No
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If yes, please indicate below the best time and way to reach you: