



# DEMENTIA ALLIANCE

of North Carolina

ENGAGE. EDUCATE. EMPOWER.

- formerly Alzheimer's North Carolina -

## Dementia Alliance of North Carolina Volunteer Application Form

This application can be completed online or returned to:

9131 Anson Way, Suite 206

Raleigh, North Carolina 27615

Hours of operation: M-F 9:00 a.m.-5:00 p.m.

Phone: 919-832-3732

Website: [www.DementiaNC.org](http://www.DementiaNC.org)

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Preferred method of communication: \_\_\_\_\_ Phone \_\_\_\_\_ Email

Available Days/Hours:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start							
End							

Is there a specific time frame you would like to volunteer or will it be on going?

Please state why you want to volunteer with our organization:

Please list any previous volunteer experience:

What type of volunteer work are you interested in?

\_\_\_\_\_ In office/Paper work

\_\_\_\_\_ Event Development

\_\_\_\_\_ Outside Events/Conferences

\_\_\_\_\_ Conference Preparation