



National Association for
Down Syndrome

VOLUNTEER FORM

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: (____) _____ WORK PHONE: (____) _____ ext. _____

CELL PHONE: (____) _____ EMAIL: _____

Occupations: _____

VOLUNTEER OPPORTUNITIES

Fundraising Events:

_____ **Bowl-a-thon** (Serve on a committee, solicit auction & raffle items, solicit sponsors, work the event)

_____ **Fashion Show** (Serve on a committee, solicit auction & raffle items, solicit sponsors, work the event)

_____ **Holiday Appeal** (Prepare the appeal for mailing)

Individuals are needed to serve on the following committees:

_____ Adult Matters

_____ Programs

_____ Education

_____ Public Awareness

_____ Government Affairs

_____ Membership

_____ Communications

_____ Development

_____ Conference

Program Opportunities:

_____ Public Awareness

_____ Parent Support Program

_____ Medical Outreach

Do you have an area of expertise or a special talent to share? If so, please list below:

Please complete the form and fax it to 847-723-3136, e-mail it to: info@nads.org
or mail to P.O. Box 206 Wilmette, IL 60091

For additional information about the volunteer opportunities listed above contact NADS at 630-325-9112.

Thank you for your interest in the National Association for Down Syndrome.