

INDIVIDUAL REGISTRATION FORM

(Please print)

PERSONAL INFORMATION				
First Name		Last Name		
Email Address				
Telephone Number				
Street Address				
City		Sta	ate	Zip Code
Are you at least 16 years of age?	○ Yes	 No If you are under 18, your waiver must be signed by a parent before you can begin working. 		
Is this for required community service	e? If yes, please o	elaborate.		
VOLUNTEERING INFORMATION				
We need volunteers on a regular b Please enter your first and second		_	-	_
email you with availability. Please note: If you fail to show up to your vo in the future.				
First Choice Volunteer Date	/	//	YY	
Second Choice Volunteer Date		<i>'</i>	/	

Please email your completed form to the Habitat Boston ReStore:

MM

DD

YY

restorevolunteers@habitatboston.org