



2013 Allocations Volunteer Registration Form

Name: _____

Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Fax: _____

Home or Cell Phone: _____

Email Address: _____

I would be willing to review an Agency's Audit and 990 Yes No

I have served on an allocations panel in the past Yes No

I have or am serving as a volunteer or board member with the following agencies (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> American Red Cross | <input type="checkbox"/> Family Crisis Center |
| <input type="checkbox"/> Aztec Boys & Girls Club | <input type="checkbox"/> Girl Scouts |
| <input type="checkbox"/> Big Brothers Big Sisters | <input type="checkbox"/> Boys & Girls Club of Bloomfield |
| <input type="checkbox"/> Kirtland Youth Association | <input type="checkbox"/> Navajo United Methodist Ctr. |
| <input type="checkbox"/> Boys & Girls Club of Farmington | <input type="checkbox"/> PATH |
| <input type="checkbox"/> Boy Scouts | <input type="checkbox"/> Presbyterian Medical Services |
| <input type="checkbox"/> Childhaven | <input type="checkbox"/> Home for Women & Children |
| <input type="checkbox"/> Desert View Counseling | <input type="checkbox"/> Sexual Assault Svc of NWNM |
| <input type="checkbox"/> NW NM Seniors | <input type="checkbox"/> Other Non Profit _____ |
| <input type="checkbox"/> ECHO, Inc. | |

I have a special interest in reviewing programs in the following areas (order your preference from 1 through 4, 1 being your first choice):

- Youth Issues Emergency Services Supporting Families
 Services to the Elderly/Disabled

I will attend Orientation/Training session on (choose one date):

Tuesday, February 12th, 2013 or Thursday, February 21st, 2013

If you would like to be involved but cannot attend the above training dates, please contact Linda Mickey at 326-1195, or email to linda.mickey@sjunitedway.org

Fax this completed form to Linda Mickey at (505) 326-0210 or send via email.