



PADS Volunteer Information

Name _____

Mailing Address _____

E-Mail Address _____

Telephone(s) Home _____ Cell _____ Work _____

Date of Birth _____ (month) _____ (day) _____ (year)

*** Each volunteer will have a partial background check.

Please volunteer to serve one shift during one week per month. Use letters for both Shift and Week to indicate your preferences (A, B and C) Indicate your first preference with A, second with B, and third with C.

Weekday	Location	Shift	Week
Sunday	Cross Lutheran, Yorkville	<input type="checkbox"/> Shift 1 <input type="checkbox"/> Shift 2 <input type="checkbox"/> Shift 3	<input type="checkbox"/> Week 1 <input type="checkbox"/> Week 2 <input type="checkbox"/> Week 3 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 5
Monday	Yorkville Congregational Church	<input type="checkbox"/> Shift 1 <input type="checkbox"/> Shift 2 <input type="checkbox"/> Shift 3	<input type="checkbox"/> Week 1 <input type="checkbox"/> Week 2 <input type="checkbox"/> Week 3 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 5
Tuesday	United Methodist of Plano	<input type="checkbox"/> Shift 1 <input type="checkbox"/> Shift 2 <input type="checkbox"/> Shift 3	<input type="checkbox"/> Week 1 <input type="checkbox"/> Week 2 <input type="checkbox"/> Week 3 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 5
Wednesday	Location is TBD	<input type="checkbox"/> Shift 1 <input type="checkbox"/> Shift 2 <input type="checkbox"/> Shift 3	<input type="checkbox"/> Week 1 <input type="checkbox"/> Week 2 <input type="checkbox"/> Week 3 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 5

Thursday	Trinity Church United Methodist	___ Shift 1 ___ Shift 2 ___ Shift 3	___ Week 1 ___ Week 2 ___ Week 3 ___ Week 4 ___ Week 5
Friday	Church of the Good Shepherd UMC	___ Shift 1 ___ Shift 2 ___ Shift 3	___ Week 1 ___ Week 2 ___ Week 3 ___ Week 4 ___ Week 5
Saturday	St. Luke's Lutheran Church	___ Shift 1 ___ Shift 2 ___ Shift 3	___ Week 1 ___ Week 2 ___ Week 3 ___ Week 4 ___ Week 5

To volunteer for PADS in another capacity, please complete the information for your area of interest:

	PADS Site	Day of Week	Week of Month (1 – 5)
Driver for Laundry			
Cook for Evening Dinner			
Serve and Cleanup Dinner			
Site Coordinator			

To volunteer to be on a **substitute list**, complete this section:

PADS Site	Shift (1 – 3)	Week of Month (1 – 5)

The completed form can be mailed to Volunteer for Kendall County PADS, PO Box 1136, Yorkville, IL 60560

Please direct your questions to Anne Engelhardt, Director, 630-553-5073 or by email at info@kendallcountypads.org

A Site Coordinator will contact you to confirm which week, shift, and position you will be serving as a volunteer.

Thank you very much for your willingness to volunteer!