

Volunteer Questionnaire

revised 6/28/04

Date: _____

Name: _____ E-Mail: _____

Mailing Address: _____

Phone: (home) _____ (work) _____ (fax) _____

Reason for interest: Parent Teacher Medical Professional _____
 Adult with Dyslexia Education Administrator Tutor
 Other (describe) _____

I would like to help with: Serving on a committee Photocopying & other office work
 Fundraising Silent Auction
 Publicity Hospitality for events
 Telephoning Member open houses
 Hosting HIDA Membership table at conferences & workshops
 I am willing to lend these other skills and talents to HIDA

I have experience with: Helping parents advocate for their children in school system
 Speaking to public groups on dyslexia
 Teaching/Presenting
 Organizing a support group for _____
 Other _____