

VOLUNTEER FORM (2017) - UNITARIAN CONGREGATION OF TAOS CARE  
COMMUNITY

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_

E-mail address \_\_\_\_\_

Full time resident of Taos: Yes \_\_\_\_\_ No \_\_\_\_\_

If you are a part-time resident, when are you usually here?

Please review the following list of potential services for UCOT members and friends. Check the ones you are willing to assist with on an on-call basis. You will not be asked to help on an unlimited basis, and a recommitment will be requested annually. We all are aware of how quickly one goes from being a "helper" to the one needing assistance. (If you filled out a volunteer form when Caring Community was formed a few years ago, let me know if your contact info or the services you are willing to provide have changed.)

- \_\_\_ Local rides\* (town of Taos)
- \_\_\_ Local rides (Taos County)
- \_\_\_ Long rides (Santa Fe and Albuquerque)
- \_\_\_ Local shopping
- \_\_\_ Hospital visits (Taos)
- \_\_\_ Hospital visits (Santa Fe or Albuquerque)
- \_\_\_ Pet care
- \_\_\_ Meal/snack preparation

\*Rides would generally be for doctor, hospital, or dental appointments.

Shopping would be for those recovering from medical procedures with limited activity restrictions. Pet care would generally be a limited commitment during a hospital or rehab stay. Other services you are willing to provide \_\_\_\_\_

For those who have filled out this form before, let me know if your contact info or the services you are willing to provide have changed.

Please return the form to [laubrecht99@gmail.com](mailto:laubrecht99@gmail.com), call at 758-9675, or give me hard copy at a service or sharing circle.

THANK YOU FOR HELPING TO MAKE OUR CONGREGATION A TRULY CARING COMMUNITY!