



THE FAMILY MEMBER

YES.....!

I WANT TO BECOME A VOLUNTEER IN THE FAMILY MEMBER - *SENIOR CARE ACTIVITIES*.

I would like to become a part of the volunteer team & give my services to
The Family Member - senior care activities.

I also take pledge to spread the **elder friendly environment** movement by the best possible ways.

PERSONAL INFORMATION :

NAME : _____ AGE : _____

ADDRESS : _____

MOBILE NO : _____ EMAIL ID : _____

PROFESSIONAL DETAILS : _____

VOLUNTEERING INFORMATION :

• **VOLUNTEERING HOURS PER WEEK :**

0-2 HOURS()

2-4 HOURS()

4+ HOURS()

• **FIELDS OF VOLUNTEERING :**

ACTIVITIES & EVENTS() ELDER CARE() CORPORATE TIE UP() BRANDING & MARKETING()

TECHNO SUPPORT() FINANCE() ADMIN & MANAGEMENT()

OTHERS (Please Specify) - _____

• Would you take out some of your time on holidays & occasions for The Family Member?

(Yes)

(No)

I herewith undertake that I will abide by the rules and regulations of The Family Member Volunteering Program and will perform the delegated work or duties in a positive manner:

DATE: _____

PLACE: _____

signature of the volunteer

The Family Member

(please attach 1 passport size photograph, id proof & address proof)

Office purpose :

Form verified by: _____

Volunteer batch: _____

signature: _____

Volunteer Id: _____