



**Every Child**  
Needs a Friend



# Welcome to the Children's Healthcare of Atlanta Volunteer Program

Name \_\_\_\_\_

Unit/Area \_\_\_\_\_

Start date \_\_\_\_\_

Shift \_\_\_\_\_

Report to coordinator \_\_\_\_\_

Phone number \_\_\_\_\_



Arrive at the Volunteer Services Office a few minutes early to sign in and get your badge and uniform.

We hope to make your volunteering experience an enjoyable one. Contact the coordinator above if you have any questions or call Volunteer Services at 404-785-VOLS(8657).

