



750 Memorial Drive
Danville, VA 24541
(434) 793-3663
info@godsstorehouse.org

Community Service Registration Form

For volunteers completing court mandated service or paying off court fines.

Personal Information

Name: _____ Nickname: _____ DOB: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: _____ Email: _____ Yes, I would like to receive GSH emails

Emergency Contact Name: _____ Relationship: _____ Phone: _____

Please list any physical limitations, medical problems or allergies: _____

Current/Last Job: _____ Education/Training: _____

Community Service Assignment Information

I have never been convicted of an act of violence, harassment, sexual misconduct or identity theft. I understand that if I have been convicted of one of these offenses I am not permitted to volunteer.

Type of Community Service: Court Mandated Hours Paying Court Fines

Amount of hours due: _____ Amount of fines due: _____ Date Due: _____

Who will need to receive verification of your completed service hours?

Organization Name: _____ Phone: _____

Contact Name: _____ Email: _____

Please select the days and times you are able to volunteer:

Shift Times	Monday	Tuesday	Wednesday	Shift Times	Thursday
9:15am-12pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9:30-11:30am	<input type="checkbox"/>
12-2:45pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11:30am-1:30pm	<input type="checkbox"/>
				1:30-3:30pm	<input type="checkbox"/>
				3:30-5:30pm	<input type="checkbox"/>

I attest that the above information is true and accurate. I hereby volunteer my services to God's Storehouse.

Volunteer Signature

Print Name

Date

Parent/Guardian Signature
(If volunteer is 17 or younger)

Print Name

Date