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	❑	❑	❑	9:30-11:30am	❑
12-2:45pm	❑	❑	❑	11:30am-1:30pm	❑
				1:30-3:30pm	❑
				3:30-5:30pm	❑

*Community Service volunteers may earn time and a half on Mondays but only if they work at least one additional shift throughout the week.

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 Print Name Date
(If volunteer is 17 or younger)