



75 Old Hope Road, Kingston, 876-812-7177

projects@oasisinternational.org

VOLUNTEER/ASSOCIATE FORM

Name: _____

Recommended By: _____

First Name: _____ MI: _____ Last Name: _____ Suffix: _____

Gender: Male Female

Occupation: _____ Business: _____

Creative work: _____ Skill: _____

Age Group: 6-10__ : 12-15__ : 16-18__ : 19-21__ : 21-50__ : 50-75: __ Other _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____ Phone: _____

Email: _____

I am a: Volunteer /Associate Volunteer/Associate Number: _____

(If unknown, email projects@oasisinternational.org) More on www.oasisinternational.org

My interest is: Associate: (State Level) _____

Volunteer (State area, level) _____,

General Assistance _____


COMMITMENT:

I volunteer as _____ state category/type - artist, worker, general, if other (state) _____ . I am prepared to give my time/ material as follows:

1. _____ minutes/ hours per ___ day, week, month to
 - a. Creative Workshop Series at _____ (location)
 - b. Creative Club _____ (location)
 - c. Creative work _____
 - d. Administrative assistance as _____
for the period D ___ M ___ YEAR _____ to D ___ M ___ YEAR _____
2. material donation of _____
3. other _____

More on www.oasisinternational.org

ACCEPTANCE:

I am not desirous of being a member of  International at this time. However, I am committing as a casual volunteer, associate, and acknowledge that the standards are limited to persons of good moral character and reputation. I recognize the importance of empowering youth with creative power and am prepared to offer my skills and support to transform Jamaica. I understand that volunteer status is not valid until approved by the club's directors. 'I SUPPORT the Critical role and impact of THE ARTS' in youth development.

Signature: _____

Date: _____

Accepting Officer: _____ Sign: _____ On: _____