



Staff use: Background Check Training Link

Winter Haven Volunteer Application

First Name: _____ MI: ___ Last: _____

Address: _____

City: _____

Phone: _____

Birthdate: _____

Email Address: _____

*How did you hear about the need for volunteers at Winter Haven? _____

*Emergency Information: In case of an emergency, please notify:

Name _____ Relationship: _____

Contact Numbers: (H) _____ Cell: _____

I understand that by signing below I am granting Winter Haven Warming Shelter to complete a criminal background check. I further understand that by signing I release Winter Haven Shelter, Stepping Stones of Dunn County, and any volunteers and guests at the shelter, of liability while working at Winter Haven Warming Shelter.

Signature

Date

Completed Applications can be emailed to Jill Seichter at: communityconnect@steppingstonesdc.org
Or, they can be dropped off at Stepping Stones of Dunn County at 1602 Stout Road, Menomonie, WI 54751 (715)235-2920