SHREE PASHUPATINATH AND BUDDHA MANDIR

VOLUNTEER REGISTRATION FORM

Please complete this form and return to the temple management by:

Email: <u>info@pashupatinathfoundation.org</u>
Give to a temple committee member

Name:		
Mailing Address:		
_		
City:Stat	:e: Ζιρ Coαε	2:
Phone Number:		
What is the best time of the day to o	call you?	
Email address:		
How often would you like to volunt	eer?	
Once a month (Date)
Twice a month (Date)
Once a week (Date)
Every day		
Volunteer Time Preference: From _	AM/PM to	o AM/PM
Volunteer Job Preference:		
Cleaning Courtyard and Dining	Hall	Vacuuming Temple Floor
Prasad Distribution		Special Events
Cleaning Toilet		
Please inform the committee/volunt due to any unavoidable circumstance		as early as you can if you are unable to volunteer
* Parent signature (if under 16 years * Volunteers must be at least 14 years Thank you for your interest to volunt	ars of age).
 Signature	 Date	Approved by: