



St. Vincent de Paul Thrift Store
825 E Prospect St.
Durand, WI 54736
715-672-8975

Volunteer Application

Contact Information

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____
Home Phone: _____ Cell Phone: _____
Preferred Method of Contact: _____ Email: _____ Cell Phone: _____ Home Phone: _____

Emergency Contact Information

Name: _____
Relationship to you: _____
Home Phone: _____ Cell Phone: _____

Name: _____
Relationship to you: _____
Home Phone: _____ Cell Phone: _____

SVdP Volunteer Interest: (Please check any/all areas of interest)

Thrift Store _____ Conference Member _____ Home Visitor _____ Mobile Food Pantry _____
Other: _____

Availability: _____
One-time _____ Ongoing _____ Weekly _____ Monthly _____ Yearly _____
Mornings _____ Afternoons _____ Evenings _____ Weekends _____

Special Skills, Talents, Interests:

Health Concerns or Physical Limitations:

