

WSQ Member/Volunteer Profile

YOUR INPUT ON THIS SURVEY WILL BE KEPT IN THE STRICTEST CONFIDENCE AND USED TO MATCH YOUR INTERESTS AND TALENTS WITH THE GUILD'S VOLUNTEER NEEDS. PLEASE PRINT LEGIBLY.

NAME: _____ **PHONE:** _____

PREFERRED COMMUNICATION: _____ **PHONE** _____ **EMAIL** _____ **TEXT** _____

EMAIL ADDRESS: _____ **TEXT NO.:** _____

WHAT ARE SOME OF YOUR INTERESTS OR HOBBIES OUTSIDE OF QUILTING?

TELL US A LITTLE ABOUT YOUR SKILLS AND BACKGROUND. DO YOU HAVE EXPERIENCE IN ANY OF THE FOLLOWING:

_____ ARTWORK AND/OR DESIGN

_____ COMPUTER SKILLS, SPREADSHEETS, WORDPROCESSING

_____ COMPUTER SKILLS, WEB PAGE MAINTENANCE, SOCIAL MEDIA KNOWLEDGE

_____ PUBLIC SPEAKING, PRESENTATIONS _____ FINANCIAL BACKGROUND, BOOKKEEPING

_____ WORKING WITH THE PUBLIC, RETAIL, MARKETING, ADVERTISING

OTHER: _____

TELL US A LITTLE ABOUT YOUR PREFERRED SCHEDULE AND TYPE OF VOLUNTEER OPPORTUNITIES:

DO YOU PREFER SITTING _____ STANDING _____ BOTH _____ WHILE VOLUNTEERING?

DO YOU PREFER TO WORK: DAYS _____ EVENINGS _____

DO YOU NEED TRANSPORTATION TO ACTIVITIES TO VOLUNTEER: _____

WHAT TYPE OF VOLUNTEER OPPORTUNITY WOULD YOU PREFER?

SHORT TERM (SINGLE EVENT) _____ LONGER TERM OR ONGOING _____ BOTH _____

WOULD YOU BE INTERESTED IN ANY OF THE FOLLOWING OPPORTUNITIES?

_____ BOARD POSITION _____ RAFFLE QUILT TICKET SALES AT EVENTS
Position

_____ COMMITTEE CHAIRPERSON _____ RAFFLE QUILT COMMITTEE
Committee

_____ COMMITTEE MEMBER _____ CHARITY QUILTS
Committee

_____ WORK ON THE QUILT SHOW PLANNING _____ SINGLE EVENT HELPER, ON CALL

_____ ON CALL "QUICK SERVICE TEAM" TO FILL IN WHERE NEEDED ON SHORT NOTICE

OTHER: _____

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Return this form to Volunteer Coordinator in person.

Or mail to:

WSQ

P. O. Box 7117,

Spokane, WA 99207-0117

Or scan and email to:

volunteer.coordinator@wsqspokane.org

Thank you for your participation in this survey. We need your help and we are better when we work together.

Washington State Quilters Spokane Chapter