



## VOLUNTEER FORM

Thank you for supporting Shalom House as it helps local women and their children. Please check the opportunity which applies to you.

- I would like to receive more information about Shalom House and how I can help
- I would like a Shalom House representative to contact me, or visit me to arrange a volunteer opportunity.
- I want to hold a fundraiser for Shalom House.
- I want to drop off clothing, linens, furniture, or other household items. Contact me to make those arrangements.
- I would like to donate my time to help at the shelter.
- I would like to help Shalom House clients get to their appointments.
- I want to make a financial contribution to Shalom House, but need more information.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Mail The Completed Form To:  
Shalom House  
P.O. Box 3893  
Harrisburg, PA 17105