

# BFF APPLICATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Language(s) Spoken: \_\_\_\_\_

How did you hear about BFF? \_\_\_\_\_

## HOW WOULD YOU LIKE TO HELP?

- 'As-Needed' Volunteer
- Holidays & Birthday Celebration Crew
- Volunteer in our Office
- Homemade Baked Goods
- Art Projects & Decorating
- Other: \_\_\_\_\_
- Social Media Support
- Event Planning

Current Palm Beach County School Employee? YES  NO

If Yes, List School and Position: \_\_\_\_\_

In Case of Emergency Contact: \_\_\_\_\_

NAME / PHONE

Signature: \_\_\_\_\_