FOUNDATION	Volunteer Form The ECMC Foundation plans events throughout the year to raise funds to support hosp main events include a springtime gala, summer golf tournament and 4k run . Volunt number of tasks including assisting with event logistics, set-up and take-down, sellin working registration, managing a prize wheel etc. We welcome volunteers from Community and WNY Community to help us in our efforts to support the lifesay ECMC.	teers perform a ng raffle tickets, m the ECMC ving mission of
Date	- LOMO.	
Name:		
Address:		
Best Phone # to Reach You:E-MailE-MailE-Mail		_
Emergency Contact:	Phone #	_
How Did You Learn of this Opportunity?		
Volunteer Area of Interes	st :	-
○ Springfest Gala ○ Tournament of Life Golf Classic ○ Buffalo Subaru 4 mile Chase ○ Any		
Are you an ECMC Employee:YesNo		
Do you have any limitations we should be aware of?YesNo		
If yes please describe:		
		_
the permission of a parer with proper paperwork fr the ECMC Lifeline Founda responsibilities while volu	dation accepts volunteers ages 18 and up. If between the ages of 14 and 17 you nt/guardian. We gladly accept students needing community service or governme rom the school or organization requiring the service hours. Please note that volu ation are not ECMC Hospital Volunteers and will not have any patient contact. You unteering for Lifeline will center on assisting with our many events. If you are in pital please email Kathi at <u>kmitri@ecmc.edu</u>.	ent hours unteers for our

Signature of Volunteer:_____

Signature of Parent/Guardian if under 18 years of age:_____

Return form to: ECMC Foundation 462 Grider Street G1 Buffalo, NY 14202 Stacy Roeder Director of Development & Marketing (P) 716-898-5881 (F) 716-898-5783 sroeder@ecmc.edu