



Broward Children's Center
An incorporated nonprofit
200 S.E. 19th Avenue
Pompano Beach, FL 33060
Tel: 954 283-2160

Corporate/Group Volunteer Application

- Name or Organization:

- Affiliation (e.g. School, Religious Organization, Business)

- Describe the group's mission and membership composition

- *Primary Contact/Title if applicable

- Group Info:

Address _____

Tel. Number _____

Email address _____

****The Primary contact will be responsible for maintaining a list of all participating group members' emergency contact info. as well as providing signed BCC Nondisclosure forms for each participant.***

Has anyone in the group ever been charged with a misdemeanor or criminal offence?

Yes or No _____

If yes, please explain, in detail in the space provided.

Please note that a conviction does not necessarily eliminate potential volunteers in the application process. The nature of the offense and the amount of time passed since the offense will be considered in the approval process.

Number of group members volunteering _____

Our organization would like to:

- Host a fundraiser or supply drive
- Work directly with BCC residents
- Participate in special events e.g. Miles For Smiles
- Participate in Holiday Activities
- Conduct an Arts & Crafts project
- Perform a Corporate Day of Service
- Other _____

Please advise the days/hours of the week and frequency the group wishes to volunteer?

Group Volunteer applicant signature

Date

By signing this application, I attest that the above information is true and correct.

Please email completed form to volunteer@bcckids.org.