



# Mamaroneck United Methodist Church

*Loving God and Neighbor...*

## VOLUNTEER REGISTRATION

**Please return completed form to:** MUMC 546 East Boston Post Road, Mamaroneck, New York 10543  
You will be contacted by the Leader of the Ministry(s) you selected.

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

### STEP-1: ENTER YOUR CONTACT INFORMATION

*First Name:	*Last Name:
*Address 1:	*Address 2:
*Phone:	*Email:

### STEP-2: WHERE DO YOU WANT TO VOLUNTEER?

Select as many areas as desired. The leader of the appropriate ministry area will contact you to provide more details and schedule.

<input type="checkbox"/> Sunday School	<input type="checkbox"/> Prayer Support	<input type="checkbox"/> Helping Hands
<input type="checkbox"/> Youth Group	<input type="checkbox"/> Music Ministry	<input type="checkbox"/> Communications & Evangelism
<input type="checkbox"/> Worship Support	<input type="checkbox"/> Sisters' Group	<input type="checkbox"/> Outreach
<input type="checkbox"/> Hospitality & Welcome	<input type="checkbox"/> Women Retreat	<input type="checkbox"/> Boy & Cub Scouts
<input type="checkbox"/> Nurture & Care	<input type="checkbox"/> Sew n So's	<input type="checkbox"/> Addiction Recovery
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### STEP-3: ADDITIONAL INFORMATION

I. Are you a member of MUMC?  Yes  No

II. Comments or suggestions