

**International Center of York County
Volunteer Application**

Date: _____

Name: _____

Address: _____

Phone: _____

Email: _____

Best way to reach you: _____

Talents you think could benefit the ICYC:

What type of volunteer work would you prefer:

- During office hours weekly**
- Once a month**
- Only on special occasions**

Days and times you are available:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Thank you for being willing to make our community a better place!