



The Clock Building at  
1000 Herrontown Road, 2nd Floor  
Princeton, NJ 08540  
o: 609-366-6186  
f: 908-718-0332  
e: info@pjihelps.org

# Volunteer Registration

## Personal Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do you have a WhatsApp account?  Yes  No If yes, please provide # \_\_\_\_\_

By entering your WhatsApp number, you consent to receiving messages from PJI and ShareFair.

Active-Duty Military or a Veteran?  Active-Duty  Veteran  Does not apply/Prefer not to answer

Ethnicity  Hispanic or Latino  Not Hispanic or Latino  Prefer not to answer

### Race (Check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> American                                  | <input type="checkbox"/> Asian                     |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> Black or African American |
| <input type="checkbox"/> White                                     | <input type="checkbox"/> Prefer not to answer      |

### To which gender identity do you most identify

- |  |   |
|--|---|
| <input type="checkbox"/> Female                        | <input type="checkbox"/> Male             |
| <input type="checkbox"/> Transgender Female            | <input type="checkbox"/> Transgender Male |
| <input type="checkbox"/> Gender Variant/Non-Conforming | <input type="checkbox"/> Not listed       |



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Prefer not to answer

**Do you have any limitations you would like us to be aware of?**  Yes  No  Prefer not to answer

**Are you limited in the duration you have for any of these actions during the event?**

- |                                   |                                  |
|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Standing | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Bending  | <input type="checkbox"/> Lifting |
| <input type="checkbox"/> Reading  | <input type="checkbox"/> Hearing |
| <input type="checkbox"/> Seeing   |                                  |

**Are you volunteering for ShareFair on behalf of a service organization, other than Princeton Justice Initiative or AmeriCorps Seniors?**  Yes  No Organization Name? \_\_\_\_\_

## Volunteer Information

**Please select which volunteer position you would be interested in serving?**

- |   |   |
|---|---|
| <input type="checkbox"/> Tech Support               | <input type="checkbox"/> Video Conferencing Setup |
| <input type="checkbox"/> Online Research Assistance | <input type="checkbox"/> Child Care               |
| <input type="checkbox"/> Transportation             | <input type="checkbox"/> Interpreter              |
| <input type="checkbox"/> Notary                     | <input type="checkbox"/> Data Entry               |
| <input type="checkbox"/> Event Team                 |   |



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**No advance knowledge or skills are required for "Event Team".** Volunteer opportunities include: Event Host/Escort, Greeter, Welcome Center, Coat Check, Hospitality Café, Event Set-up/Event Breakdown, Guest Intake, Floater, Runner, Administrative, Note-taking for Attorney, General Assistance.

**If you selected "Interpreter", what languages do you speak?**

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> English     | <input type="checkbox"/> Spanish              |
| <input type="checkbox"/> Russian     | <input type="checkbox"/> German               |
| <input type="checkbox"/> French      | <input type="checkbox"/> Italian              |
| <input type="checkbox"/> Polish      | <input type="checkbox"/> Chinese (Simplified) |
| <input type="checkbox"/> Other _____ |   |

**Which volunteer shifts can you work?**    10am - 4pm    10am - 1pm    1pm - 4pm

**Number of hours you are available to volunteer each week (including monthly fairs).**

- 1-5    5-10    10-15    15-20

**What days are you available (including monthly fairs)?**

- Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

**May we display your first and last name on this website as a volunteer?**    Yes    No

**Name to be printed on badge** \_\_\_\_\_

**Shirt Size**    Small    Medium    Large    X-Large    XX-Large    XXX-Large

**Background Check Acknowledgement**





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Yes, I acknowledge that a background check will be initiated upon completion of this Volunteer Sign-up form. If you have any concerns, please email us at [americorps@pjihelps.org](mailto:americorps@pjihelps.org).

**Date of Birth** \_\_\_\_\_ Required for background check.

## Transportation Information

Thank you for your interest in volunteering for "Transportation"! Please complete the following to be considered for this area. Please text a picture of your Driver's License photo and text it to 973-714-0858.

**State License Issued** \_\_\_\_\_ **Driver's License Number** \_\_\_\_\_

**Driver's license expiration date** \_\_\_\_\_

**Have you ever had your license suspended or revoked?**  Yes  No

**Have you ever been in a motor vehicle accident while driving a car that resulted in bodily injury, death or motor vehicle violations?**  Yes  No



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**Have you ever been charged with driving under the influence?**  Yes  No

**Are you currently taking medications that impair your driving ability?**  Yes  No

**Have you received any fines, tickets, or citations for driving related offenses in the last 5 years? If yes, please explain.**

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**Do you have professional driving experience?**  Yes  No

**If yes, please describe your professional experience.**

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