



Volunteer Information Form

Name: _____ Date: _____

Email address: _____

How did you hear about Jewish Home?

Have you volunteered at Jewish Home in the past?

Yes No

If yes, how many times? _____

May we send you news and information about Jewish Home?

Yes (please send via email) Yes (please send to mailing address below) No

Mailing address: _____

Would you like to receive information about future volunteer opportunities at Jewish Home?

Yes (Manhattan) Yes (Bronx) Yes (Westchester) Yes (all three campuses) No

Would you be interested in learning more about becoming a Board Observer?

Yes No

Thank you for spending your day of service at The New Jewish Home!!



Photo Release Form

I, *(please print your name)* _____,

give Jewish Home the irrevocable and unrestricted right and permission to use visual recordings of me (including photographs and video) in The Jewish Home's and its affiliates' promotional and solicitation materials and for its publicity efforts. I understand that the visual recordings may be used in a publication, print ad, direct-mail piece, electronic media (including television and the internet) or other medium. In addition, I grant my permission for the Jewish Home to copyright such visual recordings. I release The Jewish Home, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use. I am 18 years of age or older.

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

Email _____

Signature _____ Date _____