



GROUP VOLUNTEER REQUEST FORM

Thank you for your interest in volunteering as a group with the Chester County Food Bank. Please only submit this form if you are requesting to volunteer as a GROUP. Volunteers must be at least 14 years of age (under 16 with an adult).

Questions about group volunteering? Contact volunteer@chestercountyfoodbank.org

Date Submitted: _____

Group Name: _____

Contact Person: _____

E-mail: _____

Phone: _____

Address: _____

City: _____ Zip: _____

Anticipated # of volunteers in the group _____

How many are children? _____ Ages of children _____

For children under 14, we encourage food drives and offer tours of the Food Bank. Please contact Phoebe Kitson-Davis (pkitson@chestercountyfoodbank.org) if you would like to arrange for a tour of the food bank.

Please give potential dates & times that your group is interested in volunteering.

Potential date(s) / time(s): give specific dates that you are interested or general day such as a Monday in January

Are you interested in volunteering at: kitchen/warehouse farm no preference

Return this form to:

(email) volunteer@chestercountyfoodbank.org

(fax) 484-359-4346 | (mail) 650 Pennsylvania Dr., Exton, PA 19341