



# Meriden Soup Kitchen, Inc.

Volunteer Application  
PO Box 2138, Meriden, CT 06450  
meridensoupkitchen@gmail.com  
www.meridensoupkitchen.org

Name (**Please Print**): \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Group Affiliation (if any): \_\_\_\_\_

Days available: \_\_\_ Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday

Are you available to volunteer on a regular basis for

- 4 hours every week (Mon, Tues or Wed) \_\_\_\_\_ Yes
- 4 hours every other week (Thurs or Fri) \_\_\_\_\_ Yes

Emergency contact: \_\_\_\_\_

Relationship to volunteer: \_\_\_\_\_ Phone: \_\_\_\_\_

School Community Service: \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Signature Print Name Date

## Signature of Parent or Legal Guardian (if volunteer is under age 18):

\_\_\_\_\_  
Parent or Guardian Signature Print Name of Parent or Guardian Date

Please complete the application and either:

- Hand deliver to the Soup Kitchen Mon - Fri between 11:00 am and 12:30 pm
- Mail to Meriden Soup Kitchen, PO Box 2138, Meriden, CT 06450
- Scan and email to [meridensoupkitchen@gmail.com](mailto:meridensoupkitchen@gmail.com)