YEAR

Volunteer Membership Application

U MATTER 2, INC MEMBERSHIP APPLICATION

New Member Renew Membership

Instructions: Please complete the information below. All applications are subject to review by the Board of Directors to include but not limited to a background check.

Name:	DOB:		
Address:			
City:	State:	Zip:	
E-mail Address:		Phone:	
Are you a Veteran of the Armed Forces of	f the United States of America?	🗆 Yes 🗆 No	
What other organization do you voluntee any?			
What days of the week are you available?			
🗆 Monday 🗆 Tuesday 🗆 Wednesday 🗆 T	hursday 🗆 Friday 🗆 Saturday 🗆 Su	ınday	
What interests or skills do you have:			
Have you ever been convicted of a felony	or misdemeanor? If yes, please ex		
I, the undersigned, do hereby agree to ab support the organization and its mission a	ide by the UMatter2 Inc., Constitu	ition and Bylaws, and	

Signature of Applicant ______ Date ______