

VOLUNTEER FORM

Please check all that apply:

- 1. Symposium: planning, promoting, staffing or organizing
- 2. Fund-raising: planning events, grant-writing, soliciting
- 3. Media/Publicity: TV, radio, newspapers, etc.
- 4. Newsletter: write, edit, review books, type, or mail
- 5. Neighbor Island Representative: support people on your island
- 6. Telephone Helpline Assistant (TAP): staff the phone lines
- 7. Insurance and Advocacy Volunteer: Local legislation leader.
- 8. Oahu Island Support Group Leader: Approximately 10 meetings per year
- 9. Network Support: Share your personal experience with others, lend support.
- 10. Skills Bank Volunteer: typing, graphic areas, printing, speaking
- 11. Panelist: Share your story with others at a public forum
- 12. Hawaii Board Member: Secretary, Treasurer, President, Vice President.
- 13. National representative- once annual representative for Hawaii
- 14. National Committee member-Quarterlee meetings held nationally
- 15. Physician's liaison: Keep Physician's abreast of ROH'S activities.
- 16. Media contact-Anonymous and non-anonymous volunteers to speak to media.
- 17. Hands on: Envelope stuffing, manning public booths, recruiting members
- 18. Adoption support after infertility
- 19. Parenting support after infertility

- 20. Pregnancy after infertility
- 21. Third party pregnancy support
- 22. Family and Friends out-reach
- 23. Physician out-reach
- 24. Donate funds: (hypertext-see below) Memorialize births, losses and donors
- 25. Journeys through infertility: Add your personal story to our website

YES! I am interested in volunteering for RESOLVE of Hawaii.

Name: _____

Address: _____

E-Mail: _____

Daytime Phone: _____/Evening

Phone: _____

Best time to contact you? _____

Do you have a special volunteer interest?

____ Helping with educational forums such as Focus Workshops?

____ Helping with adoption oriented activities?

____ Sharing your infertility and/or adoption experiences with others?

____ Fundraising for Resolve of Hawaii?

____ Helping to organize Resolve's volunteers?

____ Staffing a shift on the Telephone Helpline (training provided)

____ Using your professional skills to help with office work, the library, public relations, newsletters, marketing, etc.

____ Working on insurance and advocacy issues

____ Community outreach

____ Family Member or Friend who is interested in helping

Do you have any other skills that you would be interested in using as a volunteer?

VOLUNTEER DONATIONS

Yes, I would like to donate to RESOLVE of Hawaii

My donation of \$_____ is enclosed.

I am making this bequest because:

It is a Memorial bequest in honor of

(Name)_____

Memorial bequests can be made to thank the persons in your life for the gift that they have shared with you in your infertility journey or to memorialize Anniversaries, births, adoptions, deaths, pregnancy losses and all infertility partnerships, facilitators, medical staff and past or present RESOLVE members.

Fill in the form above and return it to RESOLVE by:

**Mail: Resolve of Hawaii P.O. Box 29193
Honolulu, HI. 96820**

Or just send us an e-mail: ResolveofHawaii@aol.com

All information will be kept confidential.

THANKS!

RESOLVE of Hawaii