



Amrit Yoga Institute
Application for Volunteer Program

Name:

First	Middle	Last	Sanskrit
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Address:

Street	City/State	Postal Code
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Telephone

Home	Business	Cell
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Email _____

Skills include:

_____ General Office _____ Carpentry _____ Plumbing _____
_____ Cooking _____ Mechanical _____ Computers _____

Other: Please describe:

How much time do you see yourself offering to our center? _____

Please indicate the days that you are available:

___ Mon ___ Tue ___ Wed ___ Thurs ___ Fri ___ Sat ___ Sun

Would you be interested in spending a week or perhaps a weekend performing Seva with us?

What is the best way to contact you?

Please list two personal references (not relatives) with contact information who have known you for more than 5 years.

1. _____

2. _____

Signature of Applicant

date