

Volunteer Application

THE LEPRECHAUN FOUNDATION

7035 Columbia Road • Olmsted Falls, OH 44138 • 216-970-0618

Email completed form, as an attachment, to: info@leprechaunfoundation.org
or mail completed form to the above address

Please print clearly if not completing this form electronically.

Name _____ Date _____

Address _____ City _____ Zip _____

Email _____ Phone _____

Work Experience – with non-profit organization _____

Work Experience – with for-profit business _____

Contributions, Contacts and Other Resources

The Leprechaun Foundation provides tangible items, such as cribs, bicycles, computers, high chairs and many low cost child safe toys for the toy chests at Ireland Cancer Center and MetroHealth Medical Center. If you have contacts and/or resources to help furnish these or similar items, please tell us about it.

I can help provide (items): _____

I am willing to contact someone that I know who might be able to furnish:

I am (or know someone) in the building trades who can help when needed:

I'm Willing to Help Raise Funds By Arranging the following fund raiser:

Note: All fundraisers must be approved in advance to make sure the fundraiser protects the anonymity of The Leprechaun Foundation and its children.

I Would Like a Speaker from The Leprechaun Foundation to Speak at My Organization

Organization _____ Date _____

I Would Like to Adopt-a-Family at Christmas

You'll help give a family a Christmas meal and toys and clothes for children who otherwise might not have Christmas at all.

I Don't Have Time or Contacts

But I do want to help put a little happiness in the life of a child and their family with the enclosed donation in the amount of:

\$ _____

Comments or Other Information

Granting wishes to terminally and chronically ill children. Make Donation Checks Payable to: The Leprechaun Foundation