

**WILLOUGHBY HILLS ISOLATED SENIORS PROGRAM
FOR EVERYDAY RELIEF (“WHISPER”)**

VOLUNTEER APPLICATION

NAME OF GROUP OR INDIVIDUAL: _____

CONTACT PERSON: _____

ADDRESS:

PHONE: _____ **ALTERNATE PHONE:** _____

EMAIL ADDRESS: _____

ASSISTANCE/SERVICES THAT YOU ARE ABLE TO PROVIDE: _____

IF GROUP, THE NUMBER OF VOLUNTEERS THAT YOU CAN PROVIDE: _____

COMMENTS: _____

Please return this form to:

City of Willoughby Hills
Mayor Weger’s Office
35405 Chardon Road
Willoughby Hills, OH 44094

If you have any questions, please call (440) 918-8730