



Meals on Wheels of Hendricks County, Inc.

P.O. Box 409, Danville, IN 46122

317.745.3469 – phone

317.718.2975 – fax

hrhmow@hendricks.org

Volunteer Application

Name _____

Address _____

Phone _____ Cell _____

E-mail address _____

Emergency Contact _____

How did you hear about this volunteer opportunity? _____

Do you have car insurance? Yes No

- Please be aware that Meals on Wheels accepts no liability for accidents or personal injuries that might occur while drivers are picking up or delivering meals.

Background Check

Information below the dotted line will be shredded once the background check is complete.

Full Legal Name _____ S.S. _____

Date of Birth _____

Signature _____

Please complete and return to the Meals on Wheels office.