

Lakeside QRU Volunteer
Expression of Interest



The Lakeside QRU is devoted to helping others and we need caring and compassionate team members to further our mission of service. There are many ways your talents and skills may benefit the Lakeside QRU. Thank you for taking the time to fill out this form and tell us how you would like to contribute to the success of the Lakeside QRU.

Part A. Contact Information

Name _____

Physical Address _____

Mailing Address (if different) _____

Phone Number(s) _____ best time to call _____

Are you interested in serving in an Emergency Medical Response position? Yes No

If Yes, complete Part B, if No, continue to Part C:

Part B. Medical or Healthcare Skills or Interest

Please indicate your medical certification level:

_____ None, but willing to take training to become an EMR or EMT
(QRU may assist with education costs!)

_____ EMR

_____ EMT

_____ Paramedic

_____ Other healthcare position or experience (explain below):

Healthcare licenses or endorsements you hold or have held:

Part C. Other Volunteer Functions and Skills

Please tell us what support functions or skills you would like to contribute (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Serving as a member of the Board of Directors | <input type="checkbox"/> Fund raising |
| <input type="checkbox"/> Computer and Information Technology | <input type="checkbox"/> Clerical |
| <input type="checkbox"/> Facility maintenance/construction | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Website and/or Graphic Design | <input type="checkbox"/> Public Relations and/or Marketing |
| <input type="checkbox"/> Other – please list: | <input type="checkbox"/> Vehicle maintenance/repair |

Part D. Level of Commitment

The Lakeside QRU welcomes all levels of experience and donations of time.

Please indicate the time commitment you are considering:

- 1-5 hours per month
- 6-10 hours per month
- 11 or more hours per month

Part E. What else would you like us to know about you?

Please return this form to:

Mail: Lakeside QRU, Inc.
Attn: Executive Director
P.O. Box 911
Lakeside, MT 59922

Fax: (406) 844-3663

You are welcome to call the QRU for more information at (406) 844-2775

Thank you for your interest in the Lakeside QRU!