

**CONTACT of Fayetteville, Inc.
Training Registration / Volunteer Application**

Name: _____ Date: _____

Address: _____ Home #: _____

City, State, Zip: _____ Cell #: _____

Email: _____ Birthday: _____

Do you require any special accommodations? _____

How you learned about this training: _____

I am interested in becoming a helpline volunteer: Yes Maybe No

Do you have any other specialized education, training, or experience in counseling or crisis intervention? (*None is required.*) If so, please share more information: _____

Employer (*if any*): _____ Occupation: _____

Work Phone # _____ May we call you at work? Yes No

Emergency Contact: _____ Phone: _____

Relationship: _____ Address: _____

Character Reference:

Name: _____ Relationship: _____

Address: _____ Telephone: _____

Non-Refundable Registration Fee of \$25.00 Includes a Complete Training Manual
Receive \$5 off for each person you recruit to attend training with you!

- Please check here if you would like to apply for an income-based scholarship.

Return form to:
CONTACT, 3507 Hill St., Hope Mills, NC 28348
or email to contactcrisishelp@gmail.com
Call 910-483-8970 with questions.