



Outreach Volunteer Application

Personal Information

All information remains Confidential

Last Name	First Name	Middle Initial
Text/Phone	Email	
Reiki Level	How long have you been practicing Reiki?	
Have you been practicing Reiki on a regular basis? Including regular self treatments? Y/N	How did you learn about the Volunteer Program?	
Insurance? Y / N (please note this does not preclude you from volunteering)	Liability Limit	
Prior volunteer experience		
Which area of SDRC Outreach are you interested in? <input type="checkbox"/> Stand Down (Military) <input type="checkbox"/> Project Homeless <input type="checkbox"/> Community Walk-A-Thons i.e. Melanoma Walk <input type="checkbox"/> Hospital <input type="checkbox"/> Hospice <input type="checkbox"/> Women's Resource Fair		
What is your personal motivation for working with this program?		
I am willing to research the following community events for possible SDRC Outreach participation:		
For your and our liability protection please indicate if you have you ever been convicted of a felony? N/Y (If Yes - Explain in detail)		
Personal Reference Name	Telephone Number	Relationship
Professional Reference Name	Telephone Number	Relationship

Signed: _____

Date: _____

Print Name: _____

For additional questions or comments, please contact us directly on our website www.SanDiegoReikiCorps.org

Return this form via email to COO@SanDiegoReikiCorps.org

Or

You may mail this form to:

**SDRC – Community Outreach Director
 3231-C Business Park Drive #213
 Vista, CA 92081**

Please include a photo or “like” us on **Facebook**.