



# Outreach Volunteer Application

## Personal Information

All information remains Confidential

Last Name	First Name	Middle Initial
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 Women's Resource Fair <input type="checkbox"/> Hospital <input type="checkbox"/> Hospice		
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](http://www.SanDiegoReikiCorps.org)

Return this form via email to [COO@SanDiegoReikiCorps.org](mailto:COO@SanDiegoReikiCorps.org)

Or

You may mail this form to:

<p><b>SDRC – Community Outreach Director</b>  <b>3231-C Business Park Drive #213</b>  <b>Vista, CA 92081</b></p>
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Please include a photo or "like" us on **Facebook**.