## **COMMUNITY/SCHOOL GROUP VOLUNTEER AUTHORIZATION MY STUFF BAGS FOUNDATION AND VOLUNTEER CENTER**

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Thank you for your kind offer to participate in the My Stuff Bags Program. Volunteer groups must fill out the following information in addition to individual Volunteer Applications, and return to:

My Stuff Bags Foundation and Volunteer Center 5347 Sterling Center Drive Westlake Village, CA 91361 Phone: 818-865-3860 Email: <u>info@mystuffbags.org</u>			
Name of group:		Date of Event:	
Brief description of group			
Address			
City			
Group Leader:	Number	r of Participants:	
Group Leader Contact Info: Phone			
E-Mail:			
Donations for Event (please check o	ne):		
Financial: In-Kind items (pl	ease specify as	s best you can):	
	1	have children age 10 and up participate f children must be accompanied by	

one adult per 5 children.

Number of children participating:\_\_\_\_\_\_ Ages:\_\_\_\_\_

Number of adults participating

Please contact the My Stuff Bags Foundation to set up a time and date for your group volunteer activity. Group volunteer activities must be scheduled well in advance.

Thanks so much for your interest! We look forward to hearing from you.

Janeen Holmes Simone Grice **President/CEO** Administrative Assistant