

## Your Availability

Please check the times and days you are available for volunteer work.

Times:

- Full day  
 11:00 am–2:00 pm  
 2:00 pm–4:00 pm

Preferred days of week:

- Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday  
 Saturday

Seasonal:

- Year round  
 Summer only  
(May–August)  
 Winter only  
(September– April)

## Annual Snowball Dance



## Auxiliary Thrift Store



## Quilting

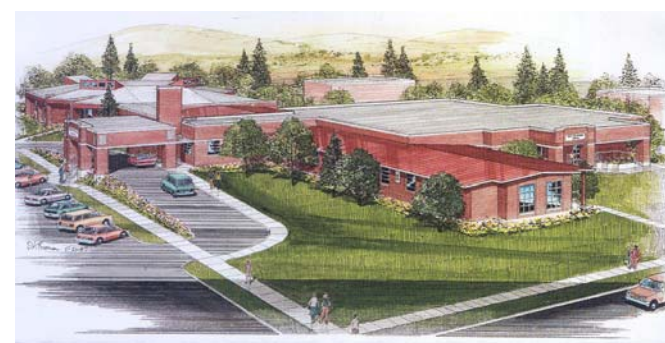


*Bear Lake  
Memorial Hospital  
Auxiliary*

164 S. 5th Montpelier ID 83254  
Phone: 208-847-4450  
Fax: 208-847-2201  
Website: [www.blmhospital.com](http://www.blmhospital.com)



*Bear Lake  
Memorial Hospital  
Auxiliary*



## *Volunteer Application*



Contact: Teresa Scott  
(208)-847-4445  
Director of Volunteer Services  
or  
Arlene (Mike) Hills (208) 945-2018  
Membership Chairperson

*Bear Lake Memorial  
Hospital Volunteer  
Application*

Today's date:

\_\_\_\_\_

Name:

\_\_\_\_\_

Home Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email address:

\_\_\_\_\_

Email checked regularly?

Yes \_\_\_\_\_ No \_\_\_\_\_

Home phone:

\_\_\_\_\_

Work phone:

\_\_\_\_\_

Person to contact in Case of  
Emergency :

Name:

\_\_\_\_\_

Phone:

\_\_\_\_\_

**Skills and Interests**

Current Occupation:

\_\_\_\_\_

Hobbies, Skills, Interests:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous Volunteer Experience:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you willing to put on a program at a  
monthly Auxiliary meeting? (List topic)

Yes \_\_\_\_\_ No \_\_\_\_\_

Topics: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any health restrictions?  
(You will not be excluded from volun-  
teer service)

Yes \_\_\_\_\_ No \_\_\_\_\_

List: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Check all areas of interest and

Circle all areas in which you have had ex-  
perience:

\_\_\_\_\_ Work in retail store

\_\_\_\_\_ Cashier

\_\_\_\_\_ Organize Displays

\_\_\_\_\_ Washing clothes

\_\_\_\_\_ Ironing

\_\_\_\_\_ Quilting

\_\_\_\_\_ Sewing

\_\_\_\_\_ Crocheting

\_\_\_\_\_ Knitting

\_\_\_\_\_ Embroidering

\_\_\_\_\_ Other Crafts

\_\_\_\_\_ Health Fairs

\_\_\_\_\_ Elderly Caregiver

\_\_\_\_\_ Organizational Leadership ( board  
member, President, Secretary, Treasurer,  
etc.)

*Auxiliary Mission  
Statement*

*The mission of the Auxiliary  
is to support and promote  
Bear Lake Memorial Hospi-  
tal and its services, patients  
and patrons throughout the  
Bear Lake Valley*