

## ***Volunteer Interest Form***



Please send me information on volunteering for the Alzheimer's Association.

*I am interested in volunteering in the following area(s):*

- Administration/ General Office
- Special Events (e.g. Memory Walk, Gala "An Evening to Remember")
- Family Services (e.g. Support Group Facilitator, data entry, etc.)
- Public Policy
- Education (Speakers Bureau, Conferences)
- Marketing/ Development

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### ***Mail or fax this form to:***

Alzheimer's Association Utah Chapter  
855 East 4800 South, Suite 100  
SLC, UT 84107  
Fax 801.269.1226

If you have any questions, please contact our office at 801.265.1944 or  
[www.utah.chapter@alz.org](http://www.utah.chapter@alz.org)