



Volunteer Boston

A web resource for community service organizations and their volunteers.

P.O. BOX 0056
ALLSTON, MASSACHUSETTS 02134
<http://www.VolunteerBoston.org>

File No. _____
Date Rec'd _____

Submission: Organization Listing

I. Instructions

State your organization here and check a box to the left. Instructions for submission follow below.

| |
|---------------------------------|
| <input type="checkbox"/> New |
| <input type="checkbox"/> Update |

Organization Name: _____

Tabulate through the form fields to enter as much information as you determine necessary or print the form and complete it by hand.

WARNING: If you use ACROBAT READER, you cannot save your completed form as an electronic file. After completion, you must print the form for submission.

For electronic submissions using **ACROBAT (full version):**

- 1) Save the completed file and
- 2) email it as an attachment to: [<submissions@VolunteerBoston.org>](mailto:submissions@VolunteerBoston.org).

For postal submissions using **ACROBAT (READER only version):**

- 1) Print the completed form and
- 2) mail it to our address above: **Attn: Submissions, Volunteer Boston**

A photo can be included with your submission for display in your organization listing. Include the photograph with your postal submission or as an email attachment. The image file should be no larger than 100K. It will be modified to a B/W GIF image 175px wide by 100px high for 72ppi display.

II. Administrative Information

The information provided below will be kept on file at Volunteer Boston. Not for distribution.

Local

| | | |
|--|-----------|------|
| Address: | | |
| City: | State: MA | Zip: |
| Website: http:// | | |
| Additional: | | |

National

| | | |
|--|--------|------|
| Address: | | |
| City: | State: | Zip: |
| Website: http:// | | |
| Additional: | | |

Submitter

| | | | |
|-------------|----------|-----------|------|
| Name: | Address: | | |
| Position: | | | |
| Phone: | Fax: | | |
| Email: | City: | State: MA | Zip: |
| Additional: | | | |



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III. Listing Information

The information provided below will be published on the web for the general public.

| Volunteering Contact | | |
|----------------------|-----------|------|
| Attn: | | |
| Address: | | |
| City: | State: MA | Zip: |
| Phone: | Fax: | |
| Email: | | |
| Other: | | |

| Photo | | |
|---|-------------------------------------|--|
| Submitted: <input type="checkbox"/> Yes | <input type="checkbox"/> Electronic | File name: _____ |
| <input type="checkbox"/> No | <input type="checkbox"/> Postal | <input type="checkbox"/> jpg <input type="checkbox"/> gif <input type="checkbox"/> tif <input type="checkbox"/> pct <input type="checkbox"/> other |

| Affiliations | | |
|--------------|------------------------------------|---|
| | <input type="checkbox"/> Political | <input type="checkbox"/> Religious <input type="checkbox"/> Other |
| Detail: | | |

| Mission Statement |
|-------------------|
| |

| Optional Statement |
|--------------------|
| Heading: |
| |

| Volunteering Opportunities |
|----------------------------|
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |