

**BLUE LEDGE  
MEALS ON WHEELS**

P.O. Box 1332  
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**VOLUNTEER APPLICATION**

***For Official Use Only***

Date of Application \_\_\_\_\_  
Beginning Date \_\_\_\_\_  
Route \_\_\_\_\_

**VOLUNTEER INFORMATION**

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email Address \_\_\_\_\_

I would like to be a: \_\_\_\_\_ Regular Driver (same route, same day each week)

\_\_\_\_\_ Substitute Driver (on call, as needed and available)

Volunteers pick up meals between 4:30 and 5:30 pm at Fairmont Crossing (Rt 60) for the North and South Routes and at noon at Mountain View Market (Lowesville Rd) for the Temperance Route.

***Days and times you are available to deliver meals:***

**M \_\_\_ T \_\_\_ W \_\_\_ Th \_\_\_ F \_\_\_ mid-day \_\_\_ end of day \_\_\_\_\_**

Place of employment \_\_\_\_\_

Please list 2 references (1 personal; 1 professional such as staff at work, civic organization, church)

\_\_\_\_\_  
\_\_\_\_\_

Have you been, or do you stand to be, convicted of either a felony or a sex offense? NO \_\_\_ YES \_\_\_

***Please read and sign the following:***

Although Blue Ledge will do everything in its power to ensure volunteer safety, I understand that I may deliver meals to clients who may have an infectious disease.

**Signature:** \_\_\_\_\_