



**VOLUNTEER INFORMATION REQUEST**

**I am interested in serving the pregnancy care clinic at:**

Oak Harbor

Langley

(Circle One)

**Name:** \_\_\_\_\_  
**Street Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_  
**State:** \_\_\_\_\_  
**Zip Code:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_

**I would like more information on how to:**

- \_\_\_\_\_ Become a Board Member
- \_\_\_\_\_ Become a speaker for the center
- \_\_\_\_\_ Join the Prayer Chain
- \_\_\_\_\_ Use my professional skills as a volunteer
- \_\_\_\_\_ Volunteer for clothing & equipment
- \_\_\_\_\_ Volunteer for yard work
- \_\_\_\_\_ Volunteer for building maintenance
- \_\_\_\_\_ Other (please specify below)

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

**Please send the completed form to the:**

Pregnancy Care Clinic  
P.O. Box 1675  
Oak Harbor, WA 98277

**Or you can call the office nearest you:**

Oak Harbor (360) 675-2096  
South Whidbey (360) 221-2909