

JOURNEY HOME BEDSIDE SINGING Program Application

Thank you for your interest in becoming a singer for *The Journey Home Singers*, a volunteer program associated with VNA & Hospice of Cooley Dickinson. Please take a few moments to complete this application, then email or mail it to our Volunteer Coordinator, Tina Leflar, at the contact information below.

Note that recruitment and acceptance of new members is based on our needs at the time. Should our positions be filled, we will let you know and put you on our waiting list for future opportunities.

SEND APPLICATION TO:

Tina Leflar Hospice Volunteer Coordinator VNA & Hospice of Cooley Dickinson 168 Industrial Drive Northampton, MA 01060 **Phone: 413-584-1060 | Fax: 413-584-7908 Email: <u>cleflar@Cooleydickinson.org</u>**

Please note: Journey Home singers must be at least 18 years old. VNA & Hospice does not discriminate based on race, color, national origin, religion, disability, sexual orientation, gender identity, or age in admission or access to treatment or participation in its programs or activities.

Date:				
Name:				
	Last	First		Middle
Home Addres	55:			
	Street		City/State	Zip
E-mail Addre	ss:			
Home Phone:		Се	ll Phone:	
Occupation:				
Can you be c	ontacted at work?	If so, please provid	e work phone:	



Please tell us something about yourself:

Why do you want to be a Hospice volunteer singer? What do you feel you would bring to the program?

What have been your personal experiences with serious illness, loss (may include divorce, job loss, etc.) and death? How did you react in these situations?

Please Give a Brief Summary of Your Musical Experience:

Please list two References (Name, address, phone, email).

Thank you for your interest in becoming a Journey Home singer. We look forward to working with you!

