

THE SOUP KITCHEN @ ST. BARNABAS

It's not just about the food!



SERVING THE HUNGRY OF YAMHILL COUNTY SINCE 1990
822 SW 2ND STREET | P.O. BOX 539 | MCMINNVILLE, OR 97128 | 503-472-3711

VOLUNTEER INFORMATION

Name: _____ Today's Date: _____

Primary phone: _____ Email: _____

Will you be working with a volunteer group? Check one. Yes No

If the above answer is YES, what is your group affiliation? _____

The Soup Kitchen at St. Barnabas' mission is to serve anyone who is hungry. Guests who come from diverse backgrounds and circumstances are neither questioned nor screened. If you have any questions or concerns while serving a guest or about volunteer procedures, please talk to the soup kitchen operations manager. The soup kitchen has four designated tasks for volunteers every serving day. Here is a list of the responsibilities and the approximate time commitments of each task:

Prep Cook – helps prepare the evening meal which may include cutting vegetables, washing meat, etc.
(10 a.m. to 12 p.m.)

Cook – assist operations manager in cooking the meal that's on the menu for that day (12 p.m. to 2:30 p.m.)

Servers – serve our guests by dishing up food, providing beverages and bussing tables. One server will be a dishwasher. Volunteer groups are welcome to sign up for this task as a group (3:45 p.m. to 6 p.m.)

Clean-up Crew – washes remaining dishes and cleans the tables, countertops and floors while putting up chairs (5:15 p.m. to 6:15 p.m.)

Which of the above tasks are you interested in performing? _____

And, which days can you perform these tasks? Mon Tue Wed Fri

Have you been convicted of a felony involving an act of violence or child abuse? Please note that a yes will not automatically exclude you from consideration in volunteering. If YES, please explain: Yes No

I confirm that the information supplied above is correct. I also understand and support the soup kitchen's mission.

X _____
Your Signature

Are you 18 years old or above? Check one. Yes No

If the answer is NO, please have your parent or guardian sign this form in order to grant permission for you to volunteer as well as provide their contact info in case of an emergency.

X _____
Parent/Guardian Signature
(not youth group leader)

Parent/Guardian Contact Number