



# AVONDALE HOUSE

3737 O'Meara Dr. • Houston, Texas 77025 • 713/993-9544 • Fax: 713/993-0751  
[www.avondalehouse.org](http://www.avondalehouse.org)

## Avondale House Volunteer Application

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address(s)  
Home \_\_\_\_\_  
\_\_\_\_\_

Office \_\_\_\_\_  
\_\_\_\_\_

Home Telephone \_\_\_\_\_ Office Telephone \_\_\_\_\_

e-mail address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License \_\_\_\_\_

What type of volunteer activities are you interested in?  
\_\_\_\_\_  
\_\_\_\_\_

What are the days and hours you are available to volunteer?  
\_\_\_\_\_  
\_\_\_\_\_

Would you consider volunteering for the following activities?  
 baseball events  
 craft activities  
 dance activities  
 day trips  
 dining out activities  
 celebration/party activities  
 overnight and/or week camp activities  
 other \_\_\_\_\_

Do you speak another language other than English? Please state \_\_\_\_\_

Thank you for your volunteer support.

Volunteer Signature \_\_\_\_\_ date \_\_\_\_\_

*A Confidentiality Agreement is attached for your signature.*

*Avondale House Mission  
To provide children and young adults with autism  
the education and training to develop to their fullest potential*



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## Confidentiality Agreement

As a volunteer of Avondale House, I, the undersigned, recognize that any materials concerning all and any clients of Avondale House or persons making contact with Avondale House are to remain in the strictest confidence. No materials concerning a particular client may be released to or discussed with anyone outside of Avondale House staff members without prior knowledge and written consent of the client, parent, or legal guardian.

I understand that violation of client confidentiality while a volunteer with this agency is grounds for termination of volunteer status and that any violation of client information either while a volunteer or following termination from Avondale House could result in Avondale House pursuing any and all legal recourse available against me.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

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A United Way Agency 3737