Volunteer Application

Name:	
Address:	
City:	
State:	
Zip code:	
Phone (da	ytime):
Phone (ev	ening):
E-mail:	
Availabilit	y:
Check vol	unteer project:
	Updating Nursing Home Database
	Advocacy
	Other (please explain project and ICBC will determine feasibility)
** We prov	ride training for all volunteer projects**
Mail to Illin	ois Citizens for Better Care
401 S. LaS	Salle St., Suite 1400
Chicago, II	_ 60605

Or email to icbc@core.com and in the subject heading write volunteer application.