

Thank you for your interest in volunteering and/or donating items to support Boston Children's Hospital! Please complete the required information below:

1.	Are you reaching out on behalf of a company? YES NO
2.	Have you supported Boston Children's Hospital in the past? YES NO a. If Yes, in what way did you support the hospital? (please check all that apply) Made a gift Participated in an event Volunteered at an event
3.	Please list your contact information below: First & Last Name
4.	Are you interested in donating items or learning about volunteer opportunities? Donating Items If Donating Items, Have you reviewed the list of items BCH accepts? (we provide attachment of this list whenever we send this form) YES or NO Please answer the following questions: Have you donated items in the past? YES or NO What would you like to donate? How Many Items are you requesting to donate? When would you like to drop off the items (please list 3 dates/times)? **Note: drop offs cannot take place on weekend or after 5PM.
	□ Volunteering If Volunteering, Have you read the list of volunteer opportunities? (Ideally we provide website link to view these) YES NO Please check all that apply: □ I would like to hold a gift card drive at my workplace *** Greatest Need □ I would like to volunteer at the Yawkey Family Inn □ I would like to volunteer at a Boston Children's Hospital Fundraising event (Radiothon, Walk)

Please submit this form to donations@chtrust.org and a member of the Boston Children's Hospital Trust team will get back to you within 2 business days. Thank you for your interest in supporting Boston Children's Hospital!