



2111 Adelpha Avenue, Holt, Michigan 48842

517-699-8454

Dear Volunteer

In order to complete our files for volunteers, we would appreciate your completing the following form.

In lieu of a physical for our volunteers, we ask that individuals interested in volunteering for Rainbow Homes to voluntarily provide the information about their medical history. This form is not an attempt to restrict anyone from volunteering nor is it intended to gain access to confidential information. Rather, it's use is merely to ensure the safety and security of our volunteers, residents and staff as well as ensure the best, most appropriate setting for our volunteers.

Thank you for your cooperation in helping us extend our services to the community.

