



Tarrant County Medical Reserve Corps  
Volunteer Request Form

Completed forms should be emailed to [mrc@tarrantcounty.com](mailto:mrc@tarrantcounty.com) at least **4 weeks prior to the event**. While we make every effort to recruit volunteers for your event, we cannot guarantee volunteer availability.

Organization Name:		
Organization Address (include city and zip):		Organization Phone:
Event Name:	Event Date(s):	Event Time:
Physical Address of Event (include city and zip):		Event Type (e.g. health fair):
Event Contact Name:	Event Contact Email:	Event Contact Phone:
Volunteer Shifts (list start <b>and</b> end time for each shift):		Number of Volunteers Needed <b>per</b> shift?
<b>Will volunteers have access to an individuals Protected Health Information (PHI) at any point during this event?</b>		Can Youth 16+ Volunteer for this Event? Yes                      No
Skills Needed (e.g. licensed healthcare professional, bilingual [list language(s)], ability to lift 'x" number of pounds, etc.):		
List the <b>specific</b> task(s) that volunteers will be performing (provide as much detail as possible):		
Additional information/instructions that should be shared with volunteers (e.g. directions, when/where/to whom volunteers should report (if different from above); parking instructions, etc.		
Will volunteers receive food/drinks/swag? Please check all that apply. <input type="checkbox"/> Food - Breakfast <input type="checkbox"/> Food - Lunch <input type="checkbox"/> Food - Dinner <input type="checkbox"/> Food - Snacks <input type="checkbox"/> Water and/or Drinks <input type="checkbox"/> Swag - t-shirt or other clothing <input type="checkbox"/> Other Swag <input type="checkbox"/> None		

Revised January 2020