

GREAT FUTURES START HERE.



CORPORATE VOLUNTEER EVENT INTEREST FORM

THANK YOU for your interest in organizing a volunteer experience with the Boys & Girls Clubs of Martin County! We're excited to learn more about your group and how we can work together to create a meaningful day of service.

Please send the completed form to: Volunteer@bgcmartin.org

COMPANY INFORMATION

Company/Organization Name:

Primary Contact Name:

Title/Role:

Email:

Phone Number:

Additional Contact Name(s) (if applicable):

Additional Contact Email(s):

How did you hear about us?

EVENT DETAILS

Preferred Event Date(s) (please provide alternatives):

Preferred Start Time: ☐ Morning ☐ Afternoon ☐ Evening

Preferred Event Duration:

Preferred Club Location(s): ☐ Greater Stuart Club ☐ Indiantown Club ☐ Hobe Sound Club
☐ Port Salerno Club ☐ Jensen Beach High School ☐ Open to any

Estimated Number of Volunteers:

GOALS & PREFERENCES

What are your goals for this volunteer event? ☐ Team building ☐ Employee engagement ☐ Youth interaction
☐ Community service ☐ Hands-on work ☐ Other:

What types of projects interest your group? ☐ Gardening/Outdoor beautification ☐ Food packing/Culinary support
☐ Academic support/Tutoring ☐ Facility improvement/Painting ☐ Event support
☐ Career readiness/Workforce development ☐ Sports/Recreation ☐ Arts/Creative activities
☐ Other:

Would your group like opportunities to interact directly with Club members (when applicable)? ☐ Yes ☐ No ☐ Maybe

LOGISTICS & PLANNING

Will your group be bringing any of the following? ☐ *Food/Snacks/Drinks* ☐ *Supplies/Materials*

(Check all that apply) ☐ *Other:*

How will your group be arriving? ☐ *Personal vehicles* ☐ *Carpool*

☐ *Charter bus* ☐ *Other:*

Will your group require any of the following? ☐ *Parking accommodations* ☐ *Presentation setup*

☐ *Indoor space* ☐ *Bus/Shuttle drop-off* ☐ *Tables/Chairs*

☐ *Special accommodations* ☐ *Other:*

Are there any physical limitations or accessibility needs we should be aware of?

EVENT EXPERIENCE

Would your group like a Club tour? ☐ *Yes* ☐ *No* ☐ *Maybe*

Would your group be interested in including lunch as part of your volunteer experience? ☐ *Yes* ☐ *No* ☐ *Maybe*

COMMUNICATION & MEDIA

May BGCMC take photos/videos during the event for marketing, social media, newsletters, and donor communications?

☐ *Yes* ☐ *No* ☐ *Need internal approval*

Would your company like to be tagged on social media? ☐ *Yes* ☐ *No* ☐ *Maybe*

Social Media Handles (if applicable): Instagram: LinkedIn:

Facebook: Twitter/X: Other:

ADDITIONAL NOTES

Please share any additional details, preferences, or questions that would help us create a successful volunteer experience for your group:

Thank you for partnering with Boys & Girls Clubs of Martin County to make a difference in the lives of local youth and families!

Once your form has been submitted to Volunteer@bgcmartin.org, our HR team will contact you to discuss next steps.

