



# FRANCISCAN SISTERS

OF LITTLE FALLS, MINNESOTA

## Volunteer Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
*City State Zip Code*

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

What do you know about the Franciscan Sisters of Little Falls?

Why do you want to be a volunteer?

Do you have any limitations with volunteering?

Is there anything below you do NOT want to help with:

- Working in the Dining Room
- Door greeters (directing people to the Chapel or Franciscan Hall)
- Blood Drive
- Driving Sisters to an appointment or event
- Activities with the Sisters (reading, crafts, etc.)
- Outside events in the summer, the gardens, etc.