

Thanksgiving Community Dinner

Thursday, November 23, 2017
Atascadero Bible Church, 6225 Atascadero Avenue
Service from 12:00 pm to 3:00 pm

A friendly group of volunteers will be serving Thanksgiving dinner to the good people of Atascadero and surrounding communities. We invite you to join us in representing Christ to our community in this outreach. Please complete this sheet by providing your name, address, Email and telephone number(s); indicate the area(s) of service you are interested in by placing an X in the appropriate box; and return it to: The North County Healing Rooms at 6995 San Luis Ave, Atascadero, CA 93422 or contact Eva Simpson at 805-423-1776 or eva20@att.net or fax to 805-239-3559. Due to the large response to this event our volunteer opportunities fill up quickly so please contact us as soon as possible to volunteer but we can always use food donations up to that day. Thank you, we appreciate your involvement!

Merchant/Individual Donations	Advertising	Setup and Greeters	Food Prep	Serving Crew	Clean Up
Procure monetary Donations <input type="checkbox"/>	Flyers <input type="checkbox"/>	Greeters <input type="checkbox"/>	Cook Turkey (18-20 lbs) <input type="checkbox"/>	Food Line <input type="checkbox"/>	Bag and Remove Trash <input type="checkbox"/>
Procure Donated Items <input type="checkbox"/>	Newspaper <input type="checkbox"/>	Decorate <input type="checkbox"/>	Stuffing/Dressing (15x10x2 pan) <input type="checkbox"/>	Table Service <input type="checkbox"/>	Wipe Down Tables and Chairs <input type="checkbox"/>
Sponsorship <input type="checkbox"/>	Radio <input type="checkbox"/>	Set Up <input type="checkbox"/>	Sweet Potato/Yams (15x10x2 pan) <input type="checkbox"/>	Making/Refilling Coffee/Tea <input type="checkbox"/>	Wash and Dry Dishes/Utensils <input type="checkbox"/>
Make a Tax Deductible Donation <input type="checkbox"/>	TV (Community Calendars) <input type="checkbox"/>	Kids Craft Table <input type="checkbox"/>	Green Bean Casserole (15x10x2 pan) <input type="checkbox"/>	Carve/Serve Pies and Whipped Cream <input type="checkbox"/>	Kitchen Clean Up <input type="checkbox"/>
	Speaking in Churches or Organizations <input type="checkbox"/>	Roll flatware <input type="checkbox"/>	Pies <input type="checkbox"/>	Carving Turkey <input type="checkbox"/>	Sweep/Mop <input type="checkbox"/>
	Door to Door handing out flyers/invitations <input type="checkbox"/>	Traffic attendants <input type="checkbox"/>	Cranberry Sauce <input type="checkbox"/>	Meal Delivery <input type="checkbox"/>	
		Visit / pray with guests <input type="checkbox"/>	Canned Whipped Cream <input type="checkbox"/>		

First and Last Name(s) of Volunteer(s) and best time to contact: _____ (Please print clearly)

Volunteer 1 Mailing Address:	City/State/Zip	Home Phone:	Email:	Cell Phone:
Volunteer 2 Mailing Address:	City/State/Zip	Home Phone:	Email:	Cell Phone:

If you wish to donate: Donation Amount: \$_____ Cash Check
**Please make checks to The North County Healing Rooms for a tax deductible donation