



Better BedRest, Inc. • P.O. Box 212 •
Savage, MD 20763 • 410-740-7662 (24-hour helpline)
or email to Joanie@betterbedrest.org

Volunteer Application

1. Name _____
2. Address _____

3. Phone h _____ w _____
4. Email _____
5. Why do you want to volunteer for Better BedRest? _____

5. Check off all the areas you are interested in for Better BedRest (For volunteers not in Maryland, please see “Out-of-State Volunteers” checklist):

- Phone Volunteer (Please fill out the bottom part of this application)
- Putting up posters in the community
- Speaking about BBR with small groups, i.e. nurses, Moms groups, or any group requesting a speaker from BBR
- Researching grant opportunities for BBR
- Researching & gathering addresses to send BBR information (i.e., OB/Gyn practices, area hospitals, etc.)
- Updating and/or maintaining our website (occasional work)
- Mailing out press releases every 2 months (we would provide the press releases and newspaper addresses)
- Helping for the BBR Read & Rest Event
- Other _____

For Out-of-State Volunteers Only (if you would like to consider being a phone volunteer please fill out the next several questions – we are just beginning to take out-of-state phone volunteers):

- Obtaining donations or cash donations for Silent Auction
- Raising funds for Read & Rest event (annual event)
- Researching grant opportunities
- Helping raise funds in your area for Better BedRest’s mission

If you are interested in being a phone volunteer, please fill out the remaining questions. You must have had bedrest experience to be a phone volunteer (either personal or work experience).

6. What is your past experience with pregnancy? _____

7. Was there an issue that you dealt with all through or part of your pregnancy that you are willing to share, i.e. fear, depression, spousal problems, worrying all the time? _____

If yes, please elaborate _____

8. If you've shared with us about what you dealt with regarding this issue(s), how would you deal with someone who calls with the same issue(s)? _____

9. If someone called and was very depressed, what would you do? _____

10. How would you deal with a caller who has lost her baby? _____

11. How would you deal with a caller who asks for your home number - just in case?

12. Have you ever volunteered for another organization? _____

If so, please supply the name(s) and phone number _____

13. If not, please supply three names (not relatives) and telephone numbers of people who have known you for more than three years. _____

14. What qualities or characteristics do you have that will make you a good volunteer for Better BedRest? _____

Thank you for your interest in Better BedRest. We will review your application and then schedule a further time to talk with you. Phone volunteers must also complete inservice and monitoring before handling calls on their own.

Updated 7/10

Better BedRest Confidentiality Statement

I, _____, on this date, _____, agree that I shall maintain the confidentiality of all information disclosed to me by Better BedRest callers. I understand that this is a major requirement and grounds for dismissal if not kept.

Signed, _____