



Neighbors Of the Onondaga Nation

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noon@peacecouncil.net • www.peacecouncil.net/noon

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone (day): _____ (eve): _____ Email: _____

Add me to NOON's email list-serv (we need an email address for this).

How did you learn about NOON? _____

What interests you about helping NOON? _____

What are some of the skills/interests you might be able to contribute or learn (check all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Tabling at Events | <input type="checkbox"/> Writing | <input type="checkbox"/> Desktop Publishing |
| <input type="checkbox"/> Helping with planning | <input type="checkbox"/> Public Relations/Media Work | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Videotaping/editing | <input type="checkbox"/> Organizing Events | <input type="checkbox"/> Data Entry |
| <input type="checkbox"/> Telephoning | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Helping at Events |
| <input type="checkbox"/> Speaking | <input type="checkbox"/> Web Page Design | <input type="checkbox"/> Graphic Arts |
| <input type="checkbox"/> Other _____ | | |

What times might you be available?

- | | | |
|--|-----------------------------------|------------------------|
| <input type="checkbox"/> Evenings | <input type="checkbox"/> Daytime | (Check all that apply) |
| <input type="checkbox"/> During the week | <input type="checkbox"/> Weekends | |

How often would you like to help?

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> 2-3 times a month | <input type="checkbox"/> Occasionally | <input type="checkbox"/> Call me if needed |
|--|---------------------------------------|--|

Do you belong to or know of an organization or group that might like a presentation by NOON?

Would you be willing to contact that group? Yes (We will contact you to discuss) No

Contact information _____

Feel free to use the back to tell us anything else you think is important. Thanks!