



**Caregiver Volunteers of
Central Jersey**

Alzheimer's Respite Care Program

www.caregivervolunteers.org

ARCP Volunteer Preference Form Prior to Family Match

ARCP VOLUNTEER NAME:

Preferred days/times for visits:

Preferred area/location:

GETTING TO KNOW YOU.....

What do/did you do for a living?

Where did you grow up?

What is your favorite music?

What do you like to do for fun? Hobbies?

Do you like sports? Favorite teams?

Do you like animals? What kind?

Can you be in a house with smokers?

Are you a veteran?

Anything else about you that might help to make a “match”?