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| **Avondale Community Council Volunteer**Top of Form**Please provide the following contact information:**

|  |  |
| --- | --- |
| *First Name* |    |
| *Last Name* |    |
| *Title* |  |
| *Organization* |  |
| *Street Address* |    |
| *Address (cont.)* |  |
| *City* |    |
| *State/Province* |    |
| *Zip/Postal Code* |    |
| *Cell Phone* |    |
|  |    |
| *E-mail* |    |

 **Select volunteer opportunities you are interested in:**  Attend Cincinnati School Board MeetingsAttend City of Cincinnati Council MeetingsAttend Hamilton County Commissioner's MeetingsParticipate in ACC membership drivesMiscellaneous As neededSend advocacy emailsBottom of Form |