

Snow Buddy Program Application Winter 2024/2025

for home-bound **and/or** disabled, **and/or** sixty years old or older, **and** with a total household income at or below \$48,508

Thank you for applying for the Snow Buddy program, hosted by Volunteer Alexandria, a nonprofit organization, connecting people to causes. By completing this form, you agree to share your address and phone number with Volunteer Alexandria, who then will share it with a volunteer(s), who will assist you with shoveling snow and possibly putting down salt during the winter season.

Please note that volunteers will try to remove ice and/or snow within 48 hours.

Please note that volunteers should:

- Never enter your home nor accept money from you
- Only should clear your sidewalk, walkway, and possibly driveway

First and Last Name:	
Full Address:	
Email:	Home phone #:
Gender: ☐ Male ☐ Female	Birth Year:
If applicable, Family Member's Name:	
Family Member's Cell Phone:	
Tell us about your property (check what applies) ☐ One sidewalk that needs shoveling and salting salting ☐ My house is on a corner and I have two sidewas salted	☐ One walkway that needs shoveling and alks ☐ Driveway that needs to be cleared and
Please note the ice melt that will be used may not	t be pet friendly.
Do you have any regularly scheduled critical care winter? ☐ Yes Please add weekday/s	
By signing this document, I verify that I am home- older, and that the total household income is at o information or withhold information I could be pr	or below \$48,508. I understand that if I give false
Signature:	Today's Date:

Please return the completed form **no later than November 17** to Volunteer Alexandria, 2202 Mt. Vernon Ave, Suite 200, Alexandria, VA 22301. Call 703-836-2176 for questions.