



2014 Volunteer Annual Update Attestation

Attestation must be completed and returned by **November 14, 2014**

I confirm that I have watched and listened to the 2014 Annual Update presentation in its entirety and that I will adhere to the policies and procedures described in the presentation.

Signature _____

Print name _____ Date _____

Adult _____ College _____ High School _____

Return this document by:

- Scanning and emailing to maryjayne.johnstone@huntingtonhospital.com
- Faxing to 626.397.2119
- Hand-delivering to the Volunteer Department
- Mailing to:

Huntington Memorial Hospital
Volunteer and Customer Services
100 West California Blvd.
Pasadena, CA 91105