

Volunteer Application

Contact Information

Name	
Address	
Phone Number	
E-mail Address	

Availability

During which hours are you available to volunteer

Tuesday 3PM to 8:30PMFriday 3PM to 8:30PM **Wednesday 3PM to 8:30PM**FundraisersThursday 3PM to 8:30PMSummer trips

Interests

Tell us in which areas are you interested in volunteering

- Youth Mentorship
- Events
- ____ Youth Supervision
- ____ Fundraising
- _____ Trips
- Program Development
- ____ Program Facilitation
- ____ Cooking
- ____ Homework
- ____ Sports
- Other:

Why do you wish to volunteer with us? What are you hoping to gain from this experience?



Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, i.e. hobbies and sports that would fit with the type of service we provide.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Person to Notify in Care of Emergency

Name	
Address	
Phone Number	
E-mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, or omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (Printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, colour, religion, natural origin, gender, sexual preference, age or disability. It is also the policy that all volunteers **<u>must submit a Clean Vulnerable Sector Police Check</u>** upon starting. Parents of youth members are unable to volunteer during drop-in hours.