

## VOLUNTEER APPLICATION FORM

All volunteers are required to provide a criminal record check. Volunteers who are deemed by law enforcement agencies to pose a risk to children shall not be placed in or continue to occupy positions involving work with children, families or vulnerable people.

| Date:  |                           |                         |                                  |     |  |
|--|---------------------------|-------------------------|----------------------------------|-----|--|
| Applicant:   |                           | Are you 19              | Are you 19 years or older? ☐ Yes |     |  |
| Address:   |                           |                         |                                  |     |  |
| Postal code:   | Phone:                    |                         | _/Evening                        |     |  |
| E-mail:  |                           | Day                     | Evening                          |     |  |
| Date of Birth:   |                           |                         |                                  |     |  |
| Emergency Conta<br>Contacts Full Nan   |                           |                         |                                  |     |  |
| Relationship to ye   | ou                        |                         |                                  |     |  |
| Phone Number:  | Day                       | Evening                 |                                  |     |  |
| ☐ College/univer☐ Through a fried Occupation:  Does your currer  Would you like to Languages: Sp | oken:                     | I am a former member    | GO Volunteer                     |     |  |
| Do you have any activity or camp?  |                           | fications that would as | sist with running a prog         | ram |  |
| ☐ Food safe ☐ Teacher ☐ Other  | ☐ Lifeguard<br>☐ Musician | ☐ First aid☐ Referee    | ☐ Coach                          |     |  |

| What type ☐ Clubs                        | of volunteering a                       | -                                       | terested in?<br>I Office  |   |                                       |                      |  |
|--|---|---|---|---|---------------------------------------|----------------------|--|
| ☐ Camps                                  |   | [                                       | ☐ Early education   |   | ☐ Special events                      |                      |  |
|  | ed in Club volunte                      | _                                       | here a particular l   | ocation yo                              | ou would like to v                    | olunteer at          |  |
| When are                                 | you available?                          | Please ✓                                | ,   |   |                                       |                      |  |
| Mon.                                     | Tues.                                   | Wed.                                    | Thurs.  | Fri.                                    | Sat.                                  | Sun.                 |  |
| Times:                                   | ☐ Mornings                              | Г                                       | ☐ Afternoons  | □ Ever                                  | nings                                 |                      |  |
| DECLARAT                                 | ION:                                    |   |   |   |                                       |                      |  |
| the best of                              |   | understa                                | on I provided in thi<br>nd that a false stat<br>in my dismissal.                      |   |                                       | =                    |  |
| Signature                                |   |   | Date  |   |                                       |                      |  |
| AUTHORIZ                                 | ATION FOR COLL                          | ECTION O                                | F PERSONAL INFO   | RMATION                                 | :                                     |                      |  |
| concerning<br>understand<br>organization | g my volunteering<br>d that the informa | history, a<br>ation obtai<br>tain an ap | nformation appron<br>nd to verify the ch<br>ined will be confid<br>propriate voluntee | priate to t<br>aracter re<br>ential but | ferences I have su<br>may be shared w | ed for<br>upplied. I |  |
| brochures                                |   | n additior                              | quire testimonials and to this, as part of olunteers.                                 |   | -                                     | _                    |  |
| etc taken c                              |   | s a BGC vo                              | elated to BGC. This<br>olunteer. I release  | may inclu                               |                                       | film, video,         |  |
| Signature                                |   |   | Date  |   |                                       |                      |  |

Please return application to Emily Fraser at volunteer@bgcbc.ca