

# Alberni District

## Fall Fair

### Volunteer Application



#### Contact Information

Name	
Street Address	
City Prov. Postal Code	
Home Phone	
Work Phone	
E-Mail Address	
Age Range (Circle One)	13-19    20-39    40-59    60+
How did you hear about us?	

#### Availability

During which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings  
 Weekday afternoons     Weekend afternoons  
 Weekday evenings       Weekend evenings

#### Do You Have/Will You

Check all that apply to you.

- Valid Driver's License  
 Have a Current Criminal Record Check

#### Interests

Tell us in which areas you are interested in volunteering (Use space below for any other ideas)

- Administration  
 Agriculture  
 Arts n' Crafts  
 Convener  
 Events  
 Grant Writing  
 Home & Business Show  
 Trades

### Special Skills Abilities or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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### Previous Volunteer Experience

Summarize your previous volunteer experience.

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### Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
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, 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, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.