

Courtenay Recreation Volunteer Application

Type of Volunteer Position Sought

Lewis Centre 489 Old Island Highway, Courtenay, B.C. V9N 3P5 TEL: 250-338-5371 FAX: 250-338-8600

71	5			
 Preschool Children Teens (The LINC) Special Events Special Needs 	What TIMES wou Any time Weekdays Weekends	Ild you be available? Daytime Evening		
General Information				
NAME				
MAILING ADDRESS	City	Prov. Postal Code		
Cell#:	Home#:	Day Month Year DATE OF BIRTH:		
Email:				
DO YOU CONSENT TO A CRIMINAL RE DO YOU HAVE A CURRENT FIRST AID C				
Interests & Skills				
Areas of interest, hobbies:				
Special Skills, Training, etc:				
Related Volunteer or Employment	Experience:			
Why do you want to Volunteer?				
Emergency Contact (name & pho	ne number):			
References:				
Name	Phone Number	Relationship		

Name	Phone Number	Relationship
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Name	Phone Number	Relationship
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Thank you for completing this form. It will help us find the most satisfying and appropriate volunteer service for you.

Date: _