



Steveston Community Society
Serving the Community of Steveston Since 1946

**Volunteer Event Crew
Application**

Name:	
Address (include your Postal Code):	
Telephone:	Email address:
Are you at least 16 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you over 19 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a Class 5 Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a Class 4 Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No
Successful applicants must complete a Police Information Check – do you give permission for this? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Why would you like to volunteer with the Steveston Community Society?

What previous volunteer/ work experience do you have?

Tell us about yourself!

What languages do you speak fluently?

Please indicate your availability for June – August 2018.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

Please provide 2 references:

Name:	Name:
Phone:	Phone:
Email:	Email:
Relationship/ Position:	Relationship/ Position:

Applicant's Declaration: I hereby certify that the information given on this application is true.

Applicants Signature: _____ Date Signed: _____