



Volunteer Application Form

English	French	Under 18	Military Member	Military Spouse	Civilian DND Employee	Military Dependant	Civilian
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Title	Last Name	First Name

Mailing Address			
City	Province	Postal Code	
Home Phone	Work Phone	Cellular Phone	
E-mail Address		Email is the primary way we communicate all our up-coming volunteer opportunities to our volunteers. Would you be willing to have your email added to the distribution list?	
		Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>

Area of Interest (please check all that apply)				
<i>Deployment Warline</i>	<i>Administration</i>	<i>Board of Directors</i>	<i>Children's Services</i>	<i>Christmas Gift Wrap</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Deployment Events</i>	<i>Deployment Support</i>	<i>Fundraising Events</i>	<i>Grandparents in the House</i>	<i>Odd Jobs</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Special Events</i>	<i>Teen Centre (The Edge)</i>	<i>Youth Employment Coordinator</i>	<i>Youth Mentor or Chaperone</i>	<i>Other</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you worked as a volunteer at another Military Family Resource Centre?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

If yes, where and in what areas were you involved?

What other volunteer experience do you have?

What do you hope to gain through this volunteer experience?

What special interests, skills or hobbies do you have?

References (please provide 2 character references who are not immediate family)	
Name #1	Name #2
Phone:	Phone:
Signature of Applicant	Date
Signature of Parent/Guardian (if under 18 years of age)	Date