

Bonnylodge Volunteer Application Form

Date: _____

Name: _____ **D.O.B.:** _____

Address: _____ **City:** _____ **Postal:** _____

Phone: (home) _____ (work) _____ (cell) _____

Emergency Contact Person: _____ **Phone:** _____

1. Have you ever volunteered for a similar organization as this before?

yes no

Where? _____

Please list your duties:

2. What special skills do you have to offer? (Crafting, woodworking, painting, musical, reading, listening.....)

3. Why do you wish to volunteer with us?

4. I became interested in volunteering with the Bonnylodge through: _____

5. The best time(s) for me to volunteer is: Morning Afternoon Evening Weekends

Date available to start: _____

6. Student Retired Other _____

7. Please circle which volunteer opportunities you would be interested in being a part of (note these are always changing ☺) or circle **ALL** if interested in all:

BINGO CRAFTS BUS TRIPS WALKING TRIPS WORD GAMES
DECORATING MUSIC SPECIAL EVENTS SPORTS (ie: Floor Curling)

8. Personal References:

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

Signature of Volunteer

Date

Office Use:

Staff Comments:

Date Criminal Record Received: _____

Start Date: _____