

TOWN OF WASAGA BEACH

VOLUNTEER APPLICATION



Please print clearly and complete both pages of the application form.

First & Last Name: _____

Address: _____

Postal Code: _____

Phone Number: (home) _____

(other) _____

Email Address: _____

What is your preferred method of communication? Phone Email

❖ Please indicate what activity/event you would like to volunteer for.

❖ Do you have any restrictions that you would like us to be aware of? i.e. cannot stand for more than 2 hours.

❖ Have you volunteered with the Town of Wasaga Beach previously? Yes No

❖ If you are willing to be contacted about future volunteering opportunities with the Town of Wasaga Beach, please check the box.

Emergency Contact:

In case of an emergency, please indicate someone you would to be notified.

First & Last Name: _____

Relationship: _____

Phone Number: _____ Alternative: _____

Email: _____

Disclaimer: Please note this application form will be used internally by the Town of Wasaga Beach only. No personal information will be shared with third party solicitors or any other organization.

Signature:

As a Town of Wasaga Beach Volunteer:

- I am committed to supporting the Town's Mission, Vision and Values.
- I understand that I am required to provide the Town with a current Police Check.
- I will participate in training for my volunteer role including Policies & Procedures.
- I agree to participate in performance evaluations as required.

All information contained on this application is, to the best of my knowledge true.

Volunteer Signature: _____ Date: _____

Please submit application to:

Oliwia Aron, Volunteer Activities Programmer in person at the Wasaga Beach Youth Centre located at 1621 Mosley Street, Wasaga Beach or via email at ivolunteer@wasagabeach.com . For any questions or concerns, please call Oliwia 705.441.2106.