The Salvation Army White Rock Church & Ministries VOLUNTEER APPLICATION FORM

15417 Roper Avenue, White Rock, BC V4B 2G4
T: 604-531-7314 | C: 604-802-4302 | E: Eva_Galvez@can.salvationarmy.org

Volunteer Coordinator: Eva Galvez (CO)



Full Name:				Date of Birth:				
Address			City:		Postal Code:			
Telephone:			Cell:					
Email Address:								
Emergency contact:								
Name:		Rela	Relationship:		Telephone:			
Describe briefly your employment, professional or volunteer experience, skills or hobbies:								
What/Who directed you to us?								
Why are you interested in volunteering with us?								
If you are fulfilling any of the following, please check the box:								
☐ Court Ordered Hours ☐ Pra		□ Practicun	cticum					
Availability: please state time slots available as well as day								
	Morning	Afternoon	Evening		Length of Commitment			
Monday						1-3 months		
Tuesday						3-6 months		
Wednesday						6-12 months		
Thursday						Special Event/Project		
Friday						Services Hours (hours needed)		
Saturday								
Sunday								
OFFICE USE ONLY								
Date Application Received: Volunteer Placement:								

Volunteer Opportunities Available – please indi	cate areas of interest		
Please note, all positions will be discussed and agreed up	on with the volunteer coordinator.		
☐ Seasonal Events (Spring, Summer, Christmas, etc.)	□ Adults/Seniors Ministry (JAM)		
□ Maintenance	□ Food Sorting/Packing		
☐ Driver/Assistant Driver	□ Reception/Clerical duties		
□ Meal Program/Kitchen	☐ Children's Programs: KIDS Klub/KRAFTY Kids		
☐ Income Tax Clinic (Seasonal)	□ Other:		
If you have a special talent or gift that y	ou would like to share, please let us know!		
Do you have any health concerns/allergies/past or limitations)? If so, please explain.	injuries we should be aware of (e.g. medications		
Reference			
	not related to you and has a definite knowledge of your roup leader, pastor, professor, etc.) We may contact this		
Name:	Occupation:		
Nature of Association:	Length of time known:		
Telephone:	Cellphone:		
the information on this form. The Salvation Army White government agencies as deemed necessary in order to Army White Rock Church & Ministries. I waive any right that I may have to inspect any information.	verify my suitability for involvement within The Salvation		
identified by me in this application.			
	of White Rock Ministries, and to refrain from conduct of my services. If I violate these guidelines, I understand this form, I state that all of the information given to the		
I further state that I HAVE CAREFULLY READ THE FOREG AND I SIGN THIS RELEASE AS MY OWN ACT. This is a leg understand.	•		
	 ate Witness		