

STUDENT VOLUNTEER **APPLICATION FORM**

Date of Application:		
Name:		
Address:		
City:	Postal Code:	
Phone:	Cell:	Text YES/NO
Email:		
Date of Birth:	Covid Vaccination:	Yes No
Emergency contact name:		Relationship:
Home phone #:	Cell phone #:	
Name of High School/College/Uni	versity:	
Positions:		
☐ General Volunteer Helper	(for example: special events F	Ribfest, Golf, Spring Fling, Book Sale)
Binbrook Farmers Market table set up for this purpose)	(for example: promoting GCS	programs/services with another person at a
Binbrook Fair (for example: p this purpose) – Allotted time(s) of	promoting GCS programs/servi over the weekend the fair takes	ices with another person at a table set up for s place
Reference 1 Name:	Phone	#
Reference 2 Name:	Phone	#
If under the age of 18, please hav	e a parent/guardian sign	this document.
Signature:		
Date:		
	(day/month/year)	

Thank you for your application. Please email/scan to info@glanbrookcommunityservices.ca or mail to the address below.