



Parks and Leisure Services Volunteer REGISTRATION FORM

General Information:

Name: _____

Address: _____ Postal Code: _____

Phone Number: _____ Email: _____

Emergency Contact: _____

Skills, Experience, Interests:

Present/previous employment, community or volunteer involvement:

Languages spoken:

Other skills, experience and special interest:

References:

Please provide two references:

Name: _____ Address: _____ Telephone: _____

1. _____

2. _____

Education:

Please give a brief outline of your educational background:

Please fax your completed form to Parks and Leisure Volunteer Services 604-467-7393 or email kbaird@mapleridge.org. Mail: Volunteer Services, 11925 Haney Place, Maple Ridge, BC V2X 6G2.

Please indicate your availability:

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Friday |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> Saturday |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> Sunday |
| <input type="checkbox"/> Thursday | |

Why are you interested in volunteering for Maple Ridge and Pitt Meadows Parks and Leisure Services?

What do you hope to gain from your volunteer experience here?

Are you willing to submit to a criminal record check? Yes No

Commitment:

I declare that the above information is true and complete to the best of my knowledge. I understand that a false statement may disqualify me from further consideration as a volunteer, or may result in dismissal.

I agree to volunteer for Maple Ridge and Pitt Meadows Parks and Leisure Services for the time agreed upon with the volunteer supervisor.

I agree to adhere to all Parks and Leisure department policies, procedures, and guidelines.

I understand the confidentiality requirements of the volunteer role and understand a breach in confidentiality is cause for dismissal from Volunteer Services.

Signature: _____ **Date:** _____