



11760 - 88 Avenue
Delta, BC V4C 3C5

604-594-2717



MEMBER VOLUNTEER APPLICATION FORM



Please note volunteers must be current members of Kennedy Seniors Recreation Centre

Check one: Mrs. Mr. Ms.

Last Name:

First Name:

Street Address:

Apt #

City:

Postal Code:

Home Phone:

Cell Phone:

Email:

Languages Spoken other than English:

Availability							Please check the boxes for the days and times you are available to volunteer. All volunteers must complete a Police Information Check.
	Mon	Tue	Wed	Thur	Fri	Sat	
Morning							
Afternoon							
Evenings							

- Please indicate the area you would like to volunteer:**
- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Greeter <input type="checkbox"/> Program Ambassador <input type="checkbox"/> Drop In Activity Ambassador <input type="checkbox"/> Drop in Activity Support | <ul style="list-style-type: none"> <input type="checkbox"/> Fitness Ambassador <input type="checkbox"/> Social Event Support <input type="checkbox"/> Café 88 Cashier <input type="checkbox"/> Café 88 Dishwasher <input type="checkbox"/> Café 88 Kitchen Support |
|--|---|

Signature: _____ Date: _____

