

# VOLUNTEER REGISTRATION FORM

- YES**, would like to be involved both with Les Amis and Les Grands' projects (Complete the form).
- NO**, I would only like to be involved with Les Amis' projects (Only enter the personal information).

## Personal Information

<b>Last Name</b> _____ <b>Address</b> _____ <b>Province</b> _____ <b>Home</b> _____ <b>Cell Phone</b> _____ <b>Sex</b> _____	<b>First Name</b> _____ <b>City</b> _____ <b>Postal Code</b> _____ <b>Tel. Day</b> _____ <b>Email</b> _____
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**Age**       16-25                       36-50                      **Date of birth** \_\_\_\_\_  
                   26-35                       51 and +

**Status**       Employee                       Pensioner  
                   Student                       Other, clarify \_\_\_\_\_

**Where did you hear about our search for volunteers ?**

GBCM Website                       Print, clarify \_\_\_\_\_  
 GBCM Reception                       Radio, clarify \_\_\_\_\_  
 Other, clarify \_\_\_\_\_

**What motivates you to do volunteer work?**

\_\_\_\_\_

## Volunteer experience

**Do you present do volunteer work?**

Yes                       No                      Where \_\_\_\_\_

**Do you have some experience as a volunteer?**

Yes                       No

If Yes, please describe \_\_\_\_\_

\_\_\_\_\_

## Availability

<b>Week</b> <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings	<b>Week-end</b> <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings	<input type="checkbox"/> Yes, I would like to be contacted for others opportunities <input type="checkbox"/> No, I don't want to be contacted again
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Comments: \_\_\_\_\_

\_\_\_\_\_

## Skills and capacities

**I have skills in the following domains:**

<input type="checkbox"/> Word	<input type="checkbox"/> Telemarketing
<input type="checkbox"/> Excel	<input type="checkbox"/> Reception
<input type="checkbox"/> Access	

**Langages skills:**

English	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediary	<input type="checkbox"/> Advanced
French	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediary	<input type="checkbox"/> Advanced

**Other skills or capacities, please clarify** \_\_\_\_\_

\_\_\_\_\_

## Volunteer Research

<input type="checkbox"/> Sale of Raffle Tickets <input type="checkbox"/> Reception / Information Agent <input type="checkbox"/> Fundraising during <i>The Nutcracker</i> <input type="checkbox"/> Dress-up as <i>Nutcracker</i> Characters <input type="checkbox"/> Handling	<input type="checkbox"/> Administrative work (labels, envelope shipping...) <input type="checkbox"/> Sale of Merchandise <input type="checkbox"/> Help with events <input type="checkbox"/> Telemarketing
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Registration Date: \_\_\_\_\_                      Signature: \_\_\_\_\_  
 Cancellation Date: \_\_\_\_\_                      Reason: \_\_\_\_\_