## **VOLUNTEER APPLICATION**

## SELKIRK STEELERS JUNIOR 'A' HOCKEY CLUB

1011 Manitoba Ave. Selkirk, Mb, R1A 3T7 (204)482-7020 www.selkirksteelers.com



Contact Information		
Name:		
Address:		
City/Province/Postal Code:		
Home Phone:		
Cell Phone:		
Work Phone:		
E-Mail Address:		
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Availability  During which hours are you available for volunteer assignments?		
During which hours are you a	valiable for volunteer assignments?	
Weekdays	Weekends	
Interests		
Interests		
Tell us in which areas you are interested in volunteering		
Game Day		
Community Events		
Marketing & Promotions		
Fundraising		
Steel Crew		
Corporate Sales		
Special Skills or Qualifica	ations	
•	qualifications you have acquired from employment, previous volunteer work,	
or through other activities, inc		

<b>Previous Volunteer Experience</b>	erience
Summarize your previous volunteer experience.	
Reference	
Name:	
Home Phone:	
Cell Phone:	
Work Phone:	
Relationship:	
Person to Notify in Case	of Emergency
Name:	
Address:	
City/Province/Postal Code:	
Home Phone:	
Cell Phone:	
Work Phone:	
E-Mail Address:	
Agreement and Signatur	
if I am accepted as a volunte	n, I affirm that the facts set forth in it are true and complete. I understand that eer, any false statements, omissions, or other misrepresentations made by esult in my immediate dismissal.
Name (printed):	
Signature:	
Date:	
Thank you for completing this Steelers Junior 'A' Hockey C	s application form and for your interest in volunteering with the Selkirk lub.
Office Use Only	
Date Received:	
Received By:	
Comments:	