



VOLUNTEER SERVICES APPLICATION - SUMMER GAMES 2017

PERSONAL INFORMATION

Name: _____

Gender: Male ___ Female ___ Date of Birth (dd/mm/yy): _____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Other Phone Number: _____

Email Address: _____ T-Shirt Size: _____

EMERGENCY CONTACT

MCP #: _____ Family Doctor: _____

Name: _____

Relationship: _____ Phone Number: _____

VOLUNTEER ROLES

Please select the option which best describes you, please fill out and subsequent fields.

- A new volunteer to Special Olympics
- A returning volunteer to Special Olympics? Previous involvement: _____

I would like to volunteer with:

- First Aid (Please attach a copy of your Advanced First Aid Training Certificate, PRC and VSS)
- Sports and Games; list specific sport if applicable: _____
- Opening or Closing Ceremonies Are you willing to be an official: Y N
- Medal Presentations and Results
- Dining Hall
- Wherever Needed
- Other : _____

Are you applying to volunteer as a part of a group or corporate organization? If so please list the organization and volunteer lead: _____

AVAILABILITY

Please outline your availability. Please indicate the specific times in which you are available:

	Morning	Daytime	Evening
Thurs, July 13, 2017			
Friday, July 14, 2017			
Saturday July 15, 2017			
Sunday July 16, 2017			

Are you willing to volunteer as a part of the overnight security team? If so, please attach a Police Record Check and Vulnerable Sector Screening (not more than 1 year old): _____

SCREENING CHECKLIST

Please tell us a little about yourself. Why are you interested in volunteering with the Special Olympics – Newfoundland and Labrador Summer Games:

Please provide us with two references. Please list name, telephone number, and capacity in which they know you. Please note that 1 must be a non-family member:

Signature of Applicant

Date

If you have any questions, or to submit a completed form:

Email: volunteers@sonl.ca

Phone: 709-682-7206 (Megan)

Mail: 87 Elizabeth Avenue, St. Johns, NL, A1B 1R6