



Volunteer Application

Name: _____ Birthdate: _____

Address: _____

Phone: _____ Email: _____

In what ways would you like to assist the society? Please check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Special Events Assistant Volunteer
(Youth/Student Opportunity) | <input type="checkbox"/> Cannery Farmer's Market |
| <input type="checkbox"/> Guided tours/ education programs | <input type="checkbox"/> Exhibit maintenance/construction |
| <input type="checkbox"/> Public programs/ special events | <input type="checkbox"/> Archival research/collections |
| <input type="checkbox"/> Gift Shop | <input type="checkbox"/> Board of Directors or Committees |

Why do you want to volunteer? _____

Describe your previous work or volunteer experience. _____

What language(s) do you speak? _____

Please provide a reference (from a teacher or supervisor):

Name: _____ Relationship: _____

Phone Number: _____ E-mail: _____

Applicants' Signature _____ **Date:** _____



Volunteers under age 18 must have this form signed by a parent or legal guardian.

*As guardian, I give my consent for _____ to participate in
volunteer activities at the Gulf of Georgia Cannery National Historic Site.*

Name of Guardian: _____ Contact Number: _____

Signature: _____ Date: _____

For Office Use:

Date Received: _____

Records Check: _____

Interview Date: _____

Database Updated: _____

Orientation Date: _____

Placed with: _____