



Volunteer Application

Date: _____

Ref: (Office use) _____

Name: _____
FIRST MIDDLE LAST

Address: _____
STREET & NO. CITY PROVINCE POSTAL CODE

Telephone No.: _____ Cell Phone: _____

E-mail Address: _____

In case of emergency, contact: _____
Name Relationship

Address Phone Number Cell Phone

Are you over 19 years of age? YES NO if not, Parent/Guardian signature is required.

Why would you like to volunteer with VCBIA?

What previous volunteer experience do you have?

Please list any skills/interests you have: (e.g. computer programming, word processing, social media, photography etc.)

What languages do you read, speak or write fluently? _____

Please check the areas that you would like to volunteer in: (You can check as many as you want)

- Special Events Office Administration Promotions
 Mascot Team Youth Programs _____

Please check available time for your convenient below:

Time Schedule	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							
Evening							

Days/Hours preferred: _____



RELEASE

Agreement made this _____ day of, _____ 20_____, by and between the Vancouver Chinatown BIA Society (Hereinafter referred to as "VCBIA") and _____ (hereinafter referred to as "Volunteer").

Whereas VCBIA desires to accept the gratuitous services of the Volunteer, the Volunteer desires to provide gratuitous services to VCBIA.

In consideration of the following premises and mutual covenants, and other good and valuable considerations, the receipt and sufficiency of which are hereby acknowledged, it is mutually covenanted and agreed by and between the parties hereto as follows:

1. I wish to be a Volunteer to VCBIA;
2. I acknowledge that VCBIA is not responsible for any and all damage, injury claims, and expenses of whatever nature arising from my participation as a Volunteer for VCBIA.
3. I will indemnify VCBIA and their directors, employees, volunteers, agents and sponsors, save them harmless from and against any and all loss, claims, damages, actions, liability, suits, and costs, including legal fees and fees of advisors arising out of or in connection with loss of life, personal injury, damage to property including loss of use thereof, or any other loss or injury to any person or persons, arising from this agreement, or any occurrence in, on, or during the volunteer work, or the use of the premises, or occasioned wholly or in part by the Volunteer's act or omission or by anyone for whom the Volunteer is responsible at law;
4. I am specifically granting permission to VCBIA to use my likeness, voice and words, taken during my volunteer sessions, to be used in television, radio, film, newspaper, magazines, and other media, and in any form not heretofore described, for the purpose of advertising, and/or explaining activities of VCBIA, or any other lawful purposes, without obtaining my further consent.
5. I may be dealing with confidential information and I agree to keep such information in the strictest confidence.
6. I agree to carry out my volunteer tasks in a reasonable and safe manner. I will abide by the guidance from the representatives of VCBIA.
7. I hereby agree to provide my personal information for the purposes of assigning duties, record keeping and correspondences relative to my participation as a Volunteer of VCBIA. I understand that personal information will not be used or disclosed for purposes other than those for which it is collected or as required by law.

I affirm that I have read the above and that the information I have given is true and complete.

Signature	Print Name	Date
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Legal Guardian Signature (if above is under 19)	Print Name	Date
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