

**VOLUNTEER APPLICATION FORM**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
First Last Home Work

**Address** \_\_\_\_\_  
Street Suite/Apt#  
\_\_\_\_\_  
City Province Postal Code

**E-mail** \_\_\_\_\_ **Fax** \_\_\_\_\_

**How did you hear about our volunteer program?**

Volunteer Centre  AST Website  Newspaper  TV  Other \_\_\_\_\_

**Why would you like to volunteer for the Alzheimer Society?**

\_\_\_\_\_  
\_\_\_\_\_

**What previous work and/or volunteer experience have you had that you think might be useful?**

\_\_\_\_\_  
\_\_\_\_\_

**Do you speak any languages other than English?**

\_\_\_\_\_

**Do you have access to a vehicle?**  Yes  No

**I am interested in the following:**

**Special Events/Fundraising**

- Hosting a Coffee Break
- Driver/set up/clean up at events
- Organizing a fundraising event to benefit the Society
- Helping at the Walk for Memories
- Helping at the Scotiabank Waterfront Marathon

**Office Support**

- General office help
- Advanced Microsoft Excel skills
- Photography skills
- Phone calls
- MS Access and/or database expertise
- Other (please specify)

\_\_\_\_\_

