



Volunteer Application Form

Contact Information

Name (first and last):

Are you over the age of 18? Yes No

Phone Number:

Email:

Special requirement (allergies, accessibility, etc.):

Mailing Address:

Availability

Please note the available 'shifts' are as follows. If other opportunities arise, an 'Expression of Interest' email will be sent to all volunteers

Kitchen/Dining Room Shifts (7 days a week):

Breakfast: 7:00am – 9:30am
Lunch Prep: 9:00am – 11:00am
Lunch: 11:00am – 1:30pm
Supper Prep: 3:00pm – 5:00pm
Supper: 4:30pm – 7:30pm

Boutique (Mon, Wed, Thurs, Fri):

Sorting: 9:00am – 12:00pm
Operations: 1:00pm – 3:00pm

Shelter (7 Days a week):

1:00pm – 3:00pm

Based on the available shift above, please let us know your area of interest, and your availability:

Area of Interest:

Availability:

Emergency Contact

Name:

Relationship:

Primary Phone:

Other Phone:

Reference #1

Name:	Organization:
Contact Phone:	Email:

Reference #2

Name:	Organization:
Contact Phone:	Email:

Signature

I hereby certify that the information contained in this application is correct to the best of my knowledge.

Signature:	Date:
-------------------	--------------

Certificate of Conduct & Vulnerable Sector Check:

*A Certificate of Conduct & Vulnerable Sector Check is required to volunteer in any capacity with The Gathering Place. Please find attached **A)** a letter verifying that you wish to volunteer at The Gathering Place, thereby waiving associated fees **B)** a request for your Certificate of Conduct & Vulnerable Sector Check*

For questions, and to send your completed form, please go to: VolunteerCoordination@gatheringstjohns.ca