

# **Volunteer Application Form**

| First Name:   | Last Name:                            |                      |                   |
|---|---------------------------------------|----------------------|-------------------|
| Address:  |                                       |                      |                   |
| Street  | City                                  | Province             | Postal Code       |
| Home Phone #  | Mobile #                              |                      |                   |
| Email:  |                                       |                      |                   |
| I would like to be on the event's mailing list 🖵 YES  | D NO                                  |                      |                   |
| Which Age Group Are You? 🛛 12-17 🛛 18-65  | <b>G</b> 65+                          |                      |                   |
| First Aid Certificates held (if any):   |                                       |                      |                   |
| What hobbies, skills or training do you have which  | might be useful for this              | event?               |                   |
|   |                                       |                      |                   |
| Do you have any special needs that we should know<br>(for example: mobility restrictions, serious allergies etc.) | v about? 🗖 YES 🛛                      | NO                   |                   |
| If yes, please explain:   |                                       |                      |                   |
| (This information is important in order to place you as effectively as possib                                     | le and to ensure that in case of an o | emergency we know he | ow to assist you) |
| How did you hear about the event?  Friends/Fa   | amily 🛛 Media 🛛                       | Website 🛛            | Other             |
| (please explain other)  |                                       |                      |                   |
| What other related volunteer experience do you ha   | ave?                                  |                      |                   |
|   |                                       |                      |                   |
| Do you wish to volunteer as a zombie?  Q YES  | NO                                    |                      |                   |
| Do you wish to volunteer to assist with event o   | perations? 🛛 YES                      | 🗆 NO                 |                   |

# **Screampark Volunteer Application Form**

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### Volunteer Expectations

- If I am a successful applicant as a volunteer with Screampark, I understand that I will be placed where needed for the event and will assume duties as assigned.
- My indicated preferences will be taken into consideration, when possible; there is no guarantee which crew I will be placed on
- I understand that all Event crews are required to contribute a minimum of 4 hours during the event.
- I understand that additional information may be required before placement.
- I agree to make myself available for shifts as required and fulfill the obligations of being a volunteer for the event.
- I agree to work in a safe manner at all times and will adhere to Bingemans' health and safety policies
- I agree to comply with and honour the Code of Ethics of the event as stated below ٠

## Code of Ethics for Volunteers

- All volunteers shall make every effort to present the Event in a positive way and shall not do anything to intentionally embarrass the Event.
- There shall be no use/consumption of alcohol by any volunteer who is on duty on the Event site. ۰
- There shall be no use/consumption of illegal substances or abuse of prescription drugs by any volunteer on the Event site. Abuse of this nature will result in immediate dismissal of the volunteer(s) from the Event.
- All volunteers shall treat each other volunteers, staff and the public with respect. If a problem arises, resolution should be deferred to the Event Coordinator.
- Volunteers shall make every effort to fulfill responsibilities of crew membership.
- No volunteer shall use for their own advantage any property or monies belonging to the Event. All volunteers must be honest and trustworthy.

#### I have read and agree with all of the above.

Name:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your application. Please ensure that you also fill out the Volunteer Release Form and Waiver.