

# HANG OUT

## Volunteer Application Form



Thank you for expressing interest in volunteering at Hang Out. We are looking for individuals who are positive, responsible and dependable role models, willing to build strong relationships with the students at Hang Out. Thank you for fully and accurately completing this Volunteer Application Form. The purpose of this application is to assist us in providing a safe and secure environment for everyone involved at Hang Out. All information contained will be held in confidence.

### Personal Information

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Date

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Name

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Address

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City

Province

Postal Code

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Home Phone

Cell Phone

Birthdate

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Email

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Have you ever been convicted of a felony or misdemeanour involving child abuse, sexual molestation or any other crime against a minor?  Yes  No

If yes, please specify:

### Details

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I'm available to help:

Weekly

One-time Workshop (3 consecutive weeks)  Other \_\_\_\_\_  
(please specify)

What hobbies, interests, or experience do you bring to the Hang Out team?

## Authorization and Agreement

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The information contained in this application is correct to the best of my knowledge. I authorize any references included herein to give you any and all pertinent information that they have, personal or otherwise, and release all parties from all liability for any damage from furnishing same to you. I understand that any and all information provided herein may be independently verified. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application. Additionally (please initial each box):

I have completed and processed the required consent for disclosure of criminal record through the RCMP for participating church.

I have completed and processed the required consent for check for a sexual offence for which a pardon has been granted or issued through the RCMP for participating church.

I have completed and processed the required consent for disclosure of criminal record through the RCMP for SD 33.

I have completed and processed the required consent for check for a sexual offence for which a pardon has been granted or issued through the RCMP for SD 33.

I give permission for photos or video of my participation to be used for promotional purposes, website, newsletters, organization.

Name

Date

Signature

## Hang Out is made possible by the support of the following:



Chilliwack  
Middle School



### For Office Use Only

Interview Date: \_\_\_\_\_

Interviewer's Name: \_\_\_\_\_

Volunteer's Start Date: \_\_\_\_\_