



## Volunteer Form

Please submit the following information to assist the festivals, special events and fairs build a thriving and exciting event.

**1. VOLUNTEER CONTACT INFORMATION:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Do you have a valid Ontario Driver's License?       Yes       No

Age \*: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Would you like to be on the Volunteer Mailing List?       Yes       No

**2. LANGUAGES: PLEASE CHECK THE CATEGORIES THAT APPLY TO YOU**

	Spoken			Written		
	Basic	Good	Very Good	Basic	Good	Very Good
English						
French						
Other (specify):						
Other (specify):						
Other (specify):						

**3. EDUCATION:**

High School

College / University

Other (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

**4. VOLUNTEER EXPERIENCE:**

Previous volunteer experience?  No

Yes (please indicate details below)

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Position: \_\_\_\_\_

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Position: \_\_\_\_\_

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Position: \_\_\_\_\_

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Position: \_\_\_\_\_

Event: \_\_\_\_\_ Date: \_\_\_\_\_ Position: \_\_\_\_\_

*Special Skills (CPR, Smart Serve, etc):*

---

---

---

*Volunteer Preferences:*

Administration

Security

Admission

Site Crew

Family Zone

Staging

Food and Beverage

Transportation

General

VIP

Hospitality

Volunteer Tent

Host / Hostess

Other (specify): \_\_\_\_\_

Information Booth

**5. AVAILABILITY:**

**CHOOSE MONTH AND FESTIVALS, SPECIAL EVENTS & FAIRS YOU WISH TO ASSIST**

Please visit [www.ottawafestivals.ca](http://www.ottawafestivals.ca) for details and dates for our member festivals, special events and fairs.

I am available to volunteer during the following month(s):

- |                                   |                                |                                    |                                   |
|-----------------------------------|--------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> January  | <input type="checkbox"/> April | <input type="checkbox"/> July      | <input type="checkbox"/> October  |
| <input type="checkbox"/> February | <input type="checkbox"/> May   | <input type="checkbox"/> August    | <input type="checkbox"/> November |
| <input type="checkbox"/> March    | <input type="checkbox"/> June  | <input type="checkbox"/> September | <input type="checkbox"/> December |

I would like to volunteer with the following festival(s), special event(s) & fair(s): \_\_\_\_\_

---

---

---

**6. EMERGENCY CONTACT INFORMATION AND MEDICAL HISTORY:**

Please list 3 (relatives, friends, neighbours) who we can contact in case of an emergency:

Name	Relationship	Home Phone # and Cell Phone #	Business Phone #

**7. MEDICAL HISTORY:**

Allergies:

---

---

---

Medical Conditions:

---

---

---

---

**Declaration of Accuracy:**

I hereby certify that, to the best of my knowledge, the information contained herein is complete and accurate. I understand that if any of these statements are untrue, this application may be rejected or any appointment to a position rescinded. Note: A Criminal Record / Child Welfare check may be required for all adult volunteers. Please indicate permission. I hereby give permission to do this criminal records check.

Yes

No

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

I understand that where I am signing this form as parent or legal guardian of a prospective volunteer under the age of 18, I am agreeing and warranting that I agree to have my child or ward participate as a volunteer of the Festival, Special Event or Fair and that both I and the prospective volunteer will be bound by the above terms and conditions.

Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_

---

\* Minimum age 16 years. Youth volunteers require parental consent. Please complete consent portion of this application.

Please EMAIL completed form along with a resume to [info@ottawafestivals.ca](mailto:info@ottawafestivals.ca). Please FAX (613.233.3134) or MAIL the completed form along with a resume to Ottawa Festivals, 436 MacLaren Street, Suite 300, Ottawa, ON K2P 0M8, Attention: Volunteer Coordinator.