



VOLUNTEER APPLICATION FORM

The Elizabeth Fry Society of Simcoe Muskoka
102 Maple Avenue
Barrie, ON
L4N 1S4
Tel: 705-725-0613 Fax: 705-725-0636

Personal Information: (please print clearly)

Name: _____ DOB: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ (Phone) Day: _____ Evening: _____

Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact Phone Number: _____

Are there any restrictions or allergies you have that we need to be aware of? _____

Do you have access to a vehicle or public transportation? _____

Do you have a criminal record for which you have not received a pardon? (If yes, please explain)

What is your time availability? _____

How many hours can you commit to each month? _____

Languages you can speak, read, and write: _____

Have you had any prior involvement with our agency? _____

Volunteer Interests:

**Please be aware that some of these opportunities may not apply depending on availability*

- Youth Justice Committee Restorative Justice Facilitator Fundraising Committee

Skills/Interests/Hobbies:

Education/Seminars/Courses:

Volunteer Experience:

Work Experience:

References: (please provide two professional references)

1. Name: _____ Title: _____
Email: _____

2. Name: _____ Title: _____
Email: _____

Please read and sign the following:

As a potential volunteer with Elizabeth Fry Society of Simcoe Muskoka, I am aware that I need to provide an original copy of a police criminal record check and vulnerable sector screening prior to receiving training for a volunteer role. Furthermore, I certify that the statements made by me in this application are true and complete to the best of my knowledge.

Name (please print): _____

Signature: _____

Date: _____