



Community Services Summer Camp Volunteer Application



Contact Information

Full Name: _____ Date: _____

Address: _____ Unit #: _____ Town: _____

Postal Code: _____ Home Phone: _____ Cell Phone: _____

Adult 18 yrs of age + Youth 14-17 yrs of age E-mail: _____

Birthdate (Year, Month, Date): _____

Preferred Method of Contact (check all that apply): Home #: Cell #: Email: Text:

Have you previously volunteered for the Town of Orangeville?

Yes No

Volunteer Preference Information

Check locations you are able to volunteer at?

- Alder Recreation Centre
- Tony Rose Memorial Sports Centre (Please note camp not offered here every week)
- Island Lake Conservation Area (Please note camp not offered here every week)
- Orangeville Lions Sports Park (Please note camp not offered here every week)

Please check what weeks you are available/ want to volunteer

<input type="checkbox"/> Week #1 – June 29 to July 3	<input type="checkbox"/> Week #6 – Aug 3 to Aug 7
<input type="checkbox"/> Week #2 – July 6 to July 10	<input type="checkbox"/> Week #7 – Aug 10 to Aug 14
<input type="checkbox"/> Week #3 – July 13 to July 17	<input type="checkbox"/> Week #8 – Aug 17 to Aug 21
<input type="checkbox"/> Week #4 – July 20 to July 24	<input type="checkbox"/> Week #9 – Aug 24 to Aug 28
<input type="checkbox"/> Week #5- July 27 to July 31	<input type="checkbox"/> Week #10 – Aug 31 to Sept 13

*All summer volunteers shifts will be from **9 a.m. to 4 p.m.** All volunteers are expected to come ready to swim with the campers every day; please bring appropriate swimming attire.

Emergency Contact

Please provide the names and phone numbers of individuals who can be reached in case of an emergency while you are volunteering with us.

Name	Relationship to you	Tel No. 1	Tel No. 2
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1. _____

2. _____

Volunteer Inquiries

- 1) List your experience working within children programs (le: general programs, skating, camps, special events, etc)

- 2) What type of activities are you currently involved in? (le: sports, drama, art, tech, hockey, etc)

- 3) Why do you want to volunteer with the Town of Orangeville recreation programs?

I, the undersigned, authorize investigation of statement herein. I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I acknowledge and understand that if I am successful in obtaining a volunteer placement, the placement is conditional upon completion of required training and meeting other necessary requirements. I understand that part of the conditions of placement for a direct service position is a Police Security Clearance, Vulnerable Sector Screening (for volunteers 18 years and older) that is acceptable to the Town of Orangeville within eight weeks of my Volunteer Placement (a receipt must be submitted before you begin). I understand that I am responsible for the cost of the Police Security Clearance.

I understand that completing this application form is not a guarantee of volunteer placement. All statements become part of my personal file.

Signature

Date

(YY/MM/DD)

Parent/Guardian

Date

(for applicants under age 18)

(YY/MM/DD)

To submit your application:

Please drop off your completed application form at Tony Rose Memorial Sports Centre
or Alder Recreation Centre, attention: Co-ordinator, Health and Lifestyle or
email to volunteer@orangeville.ca

Questions? Contact our Co-ordinator, Health and Lifestyle at 519-940-9092 Ext. 4131