

Volunteer Application Form

Personal Details			
First Name: Last Nam	ne:		
E-mail address:			
Home address:			
Postal code:			
Telephone (daytime):			
Age: 14-17 18-24 2	5-35 36-45		
\Box 46-55 \Box 56 and above			
Primary Language: Second	ary Language(s):		
Do you have a current driving licence? \square Yes \square No			
Do you have the use of a car?			
Do you have volunteer experience? If yes, please provide further details:			
Availability			
What day of the week are you available?			
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday			
What hours of the day are you available? \square Morning \square Afternoon \square Evenings			
How many times per week would you like to volunteer?			
Person to Notify in Case of Emergency			
Name:			
Street Address:			
Telephone (Home/Mobile):			
F-mail Address:			

Agreement and Signature

As a valued volunteer, I fully understand and agree to the following:

- For my efforts, I do not expect any monetary remuneration, salary, wage, payment or any employee benefits and understand that I am not covered by the Workplace Safety and Insurance Act.
- For the protection of all parties, I will not use any equipment that requires prior knowledge and/or formalized training, except after I have been authorized and trained to use it. If there is any question about this, I will not use the equipment until I have been authorized to do so.
- I will follow the health and safety guidelines and other directives of the Lang Yi Foundation, as well as any legislative requirements that were explained in my initial orientation as a volunteer, or at any other time during my volunteer efforts with the Lang Yi Foundation.
- I assume any risk to myself that may result directly or indirectly from my volunteer activities while on Lang Yi Foundation property. In the event that I become injured or ill while engaged in my volunteer capacity for the Foundation, I will not hold the Lang Yi Foundation responsible. The Lang Yi Foundation takes pride in and is responsible to ensure a safe and secure environment for volunteers and staff.
- In the course of participating in the volunteer program, I may be in receipt or have knowledge of confidential information including, but not limited to, client identities, material, records, memoranda, personal health information, data and results pertaining to, arising from, or containing particulars of, confidential information. I agree that I shall not at any time while I am providing volunteer services for the Lang Yi Foundation, or at any time after those services are completed, disclose to anyone any confidential information, except as may be required or permitted by law, or at the request of the Lang Yi Foundation, or as required to perform volunteer services.
- I have read this release, been given a reasonable opportunity to seek independent legal advice, and understand all of its terms; I sign it voluntarily, with full knowledge of its significance.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that ifI am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed):	Date:		
Signature:			
Volunteers from the age of 14 to 17 require Parent	al/Guardian Consent		
Name of Parent/Guardian (printed):	Date:		
Signature of Parent/Guardian:			
References – please provide two references (relatives not accepted).			
Name:		_	
Street Address:			
Telephone (Home/Mobile):			
Name:			
Street Address:			
Telephone (Home/Mobile):			