

VOLUNTEER APPLICATION FORM

Surest Sulte/App#	name										
Street City Province Postal Code Email Phone - Home Ceil Work am interested in the following: check all that apply) Special Events/Fundraising/Awareness Annual conference Support groups Corporate fundraising Organizing a fundraising event to benefit Food Allergy Canada Other General office help Literature reviewer Computer trainer Product reviewer Web researcher Other (please specify) Availability Indicate time you are available Mon. Tues. Wed. Thurs. Fri. Sat. Sun. Morning Afternoon Evening Availability to work from: Home Food Allergy Canada Toronto Office Event site Length of Commitment	Address	First Last									
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Computer trainer ☐ Product reviewer Web researcher ☐ Other (please specify) Availability Indicate time you are available Mon. Tues. Wed. Thurs. Fri. Sat. Sun.	Other										
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	_		☐ 3 to 12 m	onths \square	ongoing \Box	only for sne	ecial events				

How did you hear abo	out our volunteer program?							
☐ Friend or relative	☐. Website or e-newsletter	☐ Brochure ☐ Support Group						
☐ Other								
Why would you like to	o volunteer for Food Alleray	Canada?						
How did you hear about our volunteer program? Friend or relative Website or e-newsletter Brochure Support Group Other Why would you like to volunteer for Food Allergy Canada? What previous work and/or volunteer experience have you had?								
Indicate special skills	and or qualifications you th	nink might be useful to us:						
Other languages spol	ken: ☐ French ☐ Other _							
Other languages writt	en: 🗆 French 🗖 Other _							
Do you have access t	o a vehicle? 🗆 Yes 🔻 🗅 N	lo						
References:								
	erences below:							
Name [.]		Relationship:						
	Last							
Daytime phone:								
Dayamo phono	Home	Work						
Name:		Relationship:						
	Last							
Daytime phone:								
	Home	Work						
Signature		Date						
By signing, you give Fo	ood Allergy Canada permission	n to contact your references.						
Parent/Guardian								

Mail or fax this form to the attention of Tammy White, Office Manager To learn more contact Food Allergy Canada at 416-785-5666 or email twhite@foodallergycanada.ca

Food Allergy Canada

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