



**VOLUNTEER APPLICATION FORM**

**Name**

\_\_\_\_\_  
First Last

**Address**

\_\_\_\_\_  
Street Suite/Apt#

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

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone - Home Cell Work

**I am interested in the following:**

(check all that apply)

**Special Events/Fundraising/Awareness**

- Annual conference
- Education and awareness
- Organizing a fundraising event to benefit Food Allergy Canada
- Support groups
- Corporate fundraising

**Other**

- General office help
- Computer trainer
- Web researcher
- Literature reviewer
- Product reviewer
- 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**

- less than 3 months
- 3 to 12 months
- ongoing
- only for special events

