

CONTACT INFORMATION FORM FOR VOLUNTEERS:

Name: _____

Address: _____

E-Mail: _____

Phone #: _____

Cell #: _____

Emergency Contact Full Name: _____

Emergency Contact Phone #: _____

Emergency Contact Relationship: _____

Criminal Record check completed

*Criminal Record check must be done online at the following link:

<https://justice.gov.bc.ca/criminalrecordcheck>

Access code: ZBV9SSZE8W

Area you will be volunteering in:
