



YouthNetwork Application Form

Welcome to the Volunteer Nanaimo Youth Team! Please complete and sign the form below and email it back to: volunteernanaimo.youthnetwork@gmail.com

As of today, are you 19 or older, the age of majority in British Columbia?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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PARTICIPANT INFORMATION

First and Last Name	
Date of Birth (MM/DD/YYYY)	
Phone Number	
Email Address	
Street Address	
City	
Province	
Postal Code	

Do you have any volunteer experience? If yes, please describe your previous volunteer experience.	<input type="checkbox"/> Yes <input type="checkbox"/> No
How did you hear about the YouthNetwork program?	
What days and times are you available to volunteer?	
Why do you wish to volunteer?	



Youth Volunteer Agreement

I have read and completed this application in its entirety. I agree to abide by the standards of the Volunteer Nanaimo YouthNetwork. I agree to fulfill training requirements and volunteer responsibilities to the best of my ability. If, for any reason, I am unable to carry out my responsibilities while volunteering for Volunteer Nanaimo YouthNetwork, I will notify my supervisor as quickly as possible.

Parent/ Guardian Signature

Date