

Chaperone/Volunteer Selection Application

Name: _____ Club: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Phone: (Res.) _____ (Bus.) _____

E-mail: _____

Position(s) you are applying for

First Choice: _____ Second Choice _____

(Category i.e., WCSG, CSG, Tri-Province Midget or Youth)

If these choices were not available, would you accept a different position?

Yes _____ No _____

Identify your previous volunteer position(s) and team category(s):

(Attach a personal resume if necessary)

YEAR	TEAM	CATEGORY	POSITION

References:

(List three references (i.e. Athlete 14 & over, parent, professional).

Name: _____

Address: _____

City/Town: _____ Postal Code: _____

Phone: Res: _____ Bus: _____

E-mail: _____

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Phone: Res: _____ Bus: _____

E-mail: _____

Date: _____ Signature: _____
