

# Royal City Bowmen 2018 Volunteer Application



## Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Availability

During which hours are you available for volunteer assignments?

- |   |   |
|---|---|
| <input type="checkbox"/> Event Mornings (9:00am to 11:30am)     | <input type="checkbox"/> Event Lunch (11:30am to 1:30pm)      |
| <input type="checkbox"/> Event Afternoons (1:00pm to 3:30pm)    | <input type="checkbox"/> Half Day Morning (9:00am to 12:30pm) |
| <input type="checkbox"/> Half Day Afternoon (12:30pm to 4:00pm) | <input type="checkbox"/> Full Day (9:00am to 4:00pm)          |

## Events

Tell us in which events you are interested in volunteering:

- Spring Cleanup **Sunday, May 6<sup>th</sup> (Rain Date Sunday May 13<sup>th</sup>)**
- Spring Open 3D Shoot **Sunday, May, 20<sup>th</sup> (Rain or Shine)**
- Spring Traditional 3D Shoot **Sunday, May 27<sup>th</sup> (Rain or Shine)**
- Fall Open 3D Shoot **Sunday, Sept. 2<sup>nd</sup> (Rain or Shine)**

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.



### Previous Volunteer Experience

Summarize your previous volunteer experience or list any related events or tournaments you've attended.

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### Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

### Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

### Please Note

Volunteer hours are very important. Not-for-profit clubs such as ours rely heavily upon its members working towards common goals and the betterment of the club. Please keep track of any time you put in during cleanup days, organized events, etc. Any amount of time you contribute is all greatly appreciated.

Thank you for completing this application form and for your interest in volunteering with us.

**For any questions or clarifications please do not hesitate to contact us:**

[RoyalCityBowmen@gmail.com](mailto:RoyalCityBowmen@gmail.com)

# Royal City Bowmen Club

5329 Wellington County Rd.  
Guelph, Ontario, N1H 6H7  
519-837-1409  
royalcitybowmen.org  
royalcitybowmen@gmail.com

# VOLUNTEER TIME SHEET



Volunteer Name: \_\_\_\_\_ Age: \_\_\_\_\_

Membership #: \_\_\_\_\_ Year: \_\_\_\_\_

Date	Event	Duties/Work Involved	Start Time	End Time	Total Hrs.	Approved By:
<b>Yearly Total</b>						

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Executive Signature: \_\_\_\_\_ Date: \_\_\_\_\_