



KEMPTVILLE SNOWMOBILE KLUB

VOLUNTEER INFORMATION FORM

NAME: _____ BIRTH DATE: _____
Day Month

PHONE: HOME: _____ WORK (optional) _____

E-MAIL: _____

ADDRESS: _____

TOWN: _____ POSTAL CODE: _____

I prefer to be contacted at: _____ Home _____ Work _____ Either

It is best to reach me during: _____ Daytime _____ Evenings _____ Weekends

Please contact me by: _____ Phone _____ E-mail _____ Doesn't Matter

How did you hear about the Klub? _____

When are you interested in volunteering?

? Am Flexible	? Weekdays	? Evenings	? Varies
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What level of involvement are you looking for:

? A few hours a month	? A few hours a week	? Special Events	? Don't know yet	? Varies
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What are you most interested in helping with?

? Advertising	? Office Admin	? Special Events	? Outdoor Work	? Creative Tasks
? Baking Pies	? Selling Raffle Tickets	? Other (Specify)		

Do you need volunteer hours for school?

? YES	? NO
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PLEASE SUBMIT THIS FORM TO:

Ann Robinson, VIA Coordinator, Kemptville Snowmobile Klub
at ann@zip.ca or call (613) 768-5147
49 Main Street, Oxford Station, ON K0G 1T0