

The Schoolhouse Box Office 6788 County Road 30 North, Box 1413, Campbellford, ON KOL 1L0 705-653-5508 • 1-877-883-5777 • westben@westben.ca • westben.ca

VOLUNTEER APPLICATION FORM

First Name:	Last Name: _	Last Name:	
Mailing Address:			
Telephone (Home):	Telepho	ne (Cell):	
Email Address:			
Volunteer Jobs (please che	ck as many as you wish!)		
	Yes □ No If yes, certification number:	:	
Billeter	☐ Grounds Maintenance (Gardening)	☐ Sound or lighting (set up, running, etc)	
☐ Box Office Assistant (during performance)	Grounds Maintenance (regular Barn maintenance)	Sustainability on-the-ground (planting trees, tending gardens, building things, working with people, etc.)	
☐ Catering (providing, serving, etc)	☐ Grounds Maintenance (short term construction projects)	☐ Sustainability planning & dreaming (strategy, action plan, brainstorming, meeting on Zoom and in-person to dream together about the big picture)	
☐ Concession & Gift Shop	☐ Office Assistant (mailings, photocopying)	☐ Ticket Taker	
Costumes (sewing, etc)	☐ Parking Lot Attendant	☐ Usher	
☐ First Aid	☐ Production (assisting backstage, etc)	☐ 50/50 Seller	
☐ Golf cart driver	☐ Sets & props (building, painting, etc)		
	e check. Do you have one? Yes fortable applying for one? Yes		

Please let us know any spec	ial skills you would like to	o share:
Have you had any previous	volunteer work?	
Time Availability:		
☐ Weekdays	☐ Weekends	☐ Evenings
References (name & contac	t information):	
1.		
2		
3		
		ed form to westben@westben.ca or 6788 County Road 30, Campbellford)
Thank you for yo	our application. A Volun	teer Coordinator will contact you to follow up!
Signature:		Date:
FOR OFFICE USE ONLY:		
Completion of A		
☐ Westben's Code☐ Vulnerable Secto		ding on volunteer position)