

VOLUNTEER INTEREST FORM

revised November 2010

Personal information on this form is collected under the Freedom of Information and Protection of Privacy Act
and will be used only by the Volunteer Coordinator of The Elora Festival and Singers

(Please Print)

Name: _____ Tel: (519) _____

Address: _____ E-mail: _____
street

_____ PO Box # city postal code

Volunteer Experience: _____

If you are a continuing volunteer with EFS, how many years _____ or since _____ (eg. 1989,2001)

Are you available during the day ? yes no

Special skills: _____

Emergency contact: _____ (519) _____
name relationship telephone

Please indicate all the areas in which you would have an interest in volunteering:

- | | | |
|------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Board Committee | <input type="checkbox"/> Billeting |
| <input type="checkbox"/> Bar Tender | <input type="checkbox"/> Booksale
[once a week year round] | <input type="checkbox"/> Booksale
[weekend of] |
| <input type="checkbox"/> Box Office | <input type="checkbox"/> End of season BBQ | <input type="checkbox"/> Gala |
| <input type="checkbox"/> House Manager | <input type="checkbox"/> Office support
[involving telephone or computer tasks, etc] | <input type="checkbox"/> Receptions |
| <input type="checkbox"/> Production assistance | <input type="checkbox"/> Festival Shop | <input type="checkbox"/> Mail-out Stuffing |
| <input type="checkbox"/> Usher | <input type="checkbox"/> Wine Tasting | <input type="checkbox"/> Postering |
| | <input type="checkbox"/> Music Library | |

Other areas you would like to volunteer for _____

signature

date