The Integrated Fitness Society
2820 Bushnell Place
North Vancouver, BC, V7J 2Y8

VOLUNTEER APPLICATION

Personal Information

First Name: _____ Last Name: _____

Address: _____

City: _____ Postal Code: _____

Main Phone: _____ Secondary: _____

E-mail: _____ Birthdate: _____

Application Questions

Which of these volunteer opportunities are you interested in?

- □ Hike assistant/Sherpa
- □ Board member
- □ Marketing
- □ Fundraising
- □ Equipment maintenance
- □ Driving assistance
- □ Grant Writing
- □ Program coordination
- □ Other:_____

How did you hear about InterFit?

- □ InterFit website
- □ Craigslist
- □ Govolunteer.ca
- □ Social Media
- □ Meetup
- □ Family
- □ Friends
- □ Other:_____

Do you have any relevant qualification or certifications?

- □ First Aid – type:
- □ Non-Violent Crisis Intervention Training
- □ Lifeguard Certification
- □ Other:_____

Why are you interested in volunteering with our organization?

Do you have any experiences interacting with and/or supporting people with disabilities?

Do you have any other volunteer experience?

Any last questions or comments?

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Emergency Contact Information

First Name: _____ Last Name: _____

Relationship: _____

Main Phone: _____ Secondary: _____

E-mail: _____

Medical Information

Please list any allergies that you may have (ie animal, food or medicine-related):

Do you have any medical concerns we should be aware of?

References

First Name: _____ Last Name: _____

Company: _____

Position: _____

Main Phone: _____ Secondary: _____

E-mail: _____

Disclaimer: As a volunteer I understand that not everyone who applies to InterFit is accepted as a volunteer and that I may be accepted as a volunteer and that I may be expected to attend an orientation and/or training prior to the beginning of my volunteer duties. Any volunteer under the age of 18 must have a parent/guardian sign this form prior to any volunteering. No information in this application will be shared with any other organization other than InterFit. Every volunteer position is subject to a probationary period.

_____ _____ _____

Your Signature | Parent/Guardian Signature if under 18 years old | Date

Please send completed applications to:
info@interfit.ca or to:
2820 Bushnell Place
North Vancouver, BC
V7J 2Y8