



# Volunteer Application Form

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Availability: \_\_\_\_\_  
 Interests: \_\_\_\_\_  
 \_\_\_\_\_

**FOR OFFICE USE ONLY**

CHAIRPERSON'S APPROVAL AND/OR COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CHAIRPERSON'S SIGNATURE:

\_\_\_\_\_

DATE: \_\_\_\_\_

## BACKGROUND INFORMATION:

How long have you been a Resident in Medicine Hat? \_\_\_\_\_

In which other volunteer organizations (if any) are you or have you been involved? \_\_\_\_\_

\_\_\_\_\_

OR....

Please itemize specific areas of interest and/or expertise you have: \_\_\_\_\_

\_\_\_\_\_

## WHICH STAMPEDE ACTIVITIES INTEREST YOU MOST: (Check all that interest you)

- |  |                                       |  |  |
|--|---------------------------------------|--|--|
| Spring Rodeo <input type="checkbox"/>    | Summer Rodeo <input type="checkbox"/> | Night Show <input type="checkbox"/>          | 50/50 <input type="checkbox"/>               |
| Social <input type="checkbox"/>          | Horse Show <input type="checkbox"/>   | Country in the City <input type="checkbox"/> | Pen Show <input type="checkbox"/>            |
| Visual Arts <input type="checkbox"/>     | Chuckwagons <input type="checkbox"/>  | Parade <input type="checkbox"/>              | Kiddies Day <input type="checkbox"/>         |
| Better Living <input type="checkbox"/>   | Queen <input type="checkbox"/>        | Pioneer Village <input type="checkbox"/>     | Olde Tyme Christmas <input type="checkbox"/> |
| Health & Safety <input type="checkbox"/> | List any other activities: _____      |  |  |

List names of acquaintances now working as Stampede Volunteers: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*The* **PLACE to BE.**