



Surrey Christmas Bureau

Volunteer Application

PLEASE PRINT

DATE _____

NAME _____ PHONE _____

ADDRESS _____ CEL/ OTHER _____

CITY _____ POSTAL CODE _____ EMAIL _____

Are you: Youth (15 – 18) Adult (19 – 64) Senior (65 and above)

Area of Interest

Please check off ALL the volunteer position(s) that interest you:

- Clerical Reception Registration Data Input Delivery/PickUp Special Events
 Used Section Toy Depot /Stocking Stuffer /Sorter Fundraising Adopt –a-Family

Have you volunteered with the Surrey Christmas Bureau before? NO YES

If yes, which position? _____

Please list any training or experience that may help you volunteer:

Do you speak any languages other than English? If yes, which ones?

Have you worked with children, seniors, low-income families, special needs, etc.?

Please list any organization that you have volunteered or worked for and what you did there

Please also fill in other side

Please check off (X) all times and days you are available

Times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9:00am-12:00pm						
12:00pm-3:00pm						
3:00pm-6:00pm						

REFERENCES

List two references, other than family, you have known for at least one year.
(Co-workers, Organization, Employers, Neighbours)

REFERENCE # 1

NAME _____

RELATIONSHIP _____

PHONE _____

REFERENCE # 2

NAME _____

RELATIONSHIP _____

PHONE _____

I hereby give the Surrey Christmas Bureau consent to contact the above references.

I acknowledge the Surrey Christmas Bureau is under no obligation to provide me a volunteer placement.

Volunteer **might be required** to complete a criminal record search before position placement.

By signing the volunteer registration form, volunteers agree to give the SCB the right to reproduce, edit, distribute, publish or broadcast audio or visual media in which they are subjects in any form and manner without payment of fees. Whenever possible, a volunteer will be notified about the intended use of this material.

X _____

Signature of Applicant (or Parent/Guardian Signature for persons under 19 years old)

Are there any medical / allergy conditions we should be aware of? _____

EMERGENCY CONTACT

In case of medical or other emergency, please provide a contact name and phone number.

NAME _____ PHONE _____

Please return this application to: coordinator@christmasbureau.com Or Fax to: 604-581-9623

Surrey Christmas Bureau
PO Box 547, 10688 King George Blvd
Surrey, BC V3T 5W7 Phone: 604-581-9623



Confidentiality Agreement – Individual Volunteer

1. I acknowledge and confirm that as a volunteer I may acquire information from the Surrey Christmas Bureau and/or other parties, about certain matters and things which are of a confidential nature and that such information is the exclusive property of the Surrey Christmas Bureau, to be used for its promotion and benefit.
2. I agree that any knowledge gained as a result of my position will remain in strictest confidence.
3. I agree to exercise due care to ensure that any information I may give to others in the course of my duties as a volunteer or otherwise is information that is accurate and required to be given and is given to a party entitled to receive such information.
4. I agree I will not discuss the details of my volunteer work, my relationship with other volunteers, staff members or board directors with any representatives of the media or publicize any of the confidential aspects of my work orally or by written work or any other medium of communication.

I confirm that I have read the above statements and agree with them and I will therefore adhere to all confidential requirements contained in this agreement or as may be otherwise directed to me as an Surrey Christmas Bureau volunteer.

Date

Signature



Volunteer Code Of Ethics

As a volunteer for the Surrey Christmas Bureau, I agree to adhere to this Code of Ethics.

I pledge to:

1. Be on time for my volunteer shift, and provide my supervisor with as much notice as possible if I am unable to attend a given shift.
2. Abide by all written policies and guidelines provided to me relevant to my volunteer work.
3. Accept orientation and training in order to provide quality service; and not to use contacts made by the Surrey Christmas Bureau for business or personal gain.
4. Accept supervision in the performance of my duties, and not represent myself as an agent of the Surrey Christmas Bureau or make comments to the media press unless approved by my supervisor.
5. Perform all assigned tasks to the best of my ability, and not report to work while under the influence of alcohol or drugs.
6. Treat with courtesy each individual with whom I come into contact regardless of race, colour, religion, age, gender, sexual orientation or national ancestry.
7. Bring with a positive attitude my best skills and abilities to my volunteer work.

Date

Signature