Volunteer Application
West Broadway Community Organization

Mission Statement:

West Broadway Community Organization – to respect and support West Broadway's diversity and liveability.

Vision Statement:

West Broadway: A safe, healthy and vibrant place to live, work and play.

Thank you for your interest in volunteering with West Broadway Community Organization. Please fill in this form and return it to our office at 748 Broadway. Submitting this application form does not automatically register you as a volunteer. A staff member will contact you as volunteer opportunities become available.

Contact Information

Name (first and last):	
Pronouns: (she/her, he/him, they/them etc.)	
Phone number:	
Email:	

What is your preferred method of contact? Phone ☐ Email ☐

Availability

When are you available to volunteer? (Please check all that apply)

☐ Weekday Mornings ☐ Weekday Evenings

☐ Weekday Afternoons ☐ Weekends

How often would you like to volunteer?

☐ On a regular basis (weekly or biweekly)

☐ On a casual basis (monthly or occasionally throughout the year)

Interests

Please check all the program areas you are interested in volunteering with:

☐ Greening (gardening, composting, lawn maintenance, planting, etc.)
☐ Good Food Club (community dinners, farmers' markets, food hamper packing etc.)
☐ Harm Reduction (community walks, picking up donations etc.)
☐ Special Events (spring clean up, snoball winter carnival, postering neighbourhood, etc.)
☐ Safety (block meetings, safety walks, block contacts, block BBQs etc.)
☐ Housing (tenant support, housing advocacy, tenant rights education, etc.)

Transportation

Do you have a drivers license? Yes ☐ No ☐

Do you have a vehicle? Yes ☐ No ☐

Skills and Previous Experience

Please briefly summarize your relevant volunteer and work experience and any skills you have to offer.

Other

Why do you want to volunteer with us?

How did you hear about us?

Would you like to receive information about volunteer opportunities available through other organizations in the West Broadway area? Yes ☐ No ☐

Agreement and Signature

By signing below, I agree to uphold the mission and vision of West Broadway Community Organization. I understand that any inappropriate or disrespectful behaviour directed at community members, program participants, staff, or other volunteers may result in dismissal.

Signature: _____ Date: _____

Our Policy

It is the policy of West Broadway Community Organization to screen all prospective volunteers. While we try to place every prospective volunteer, we reserve the right to decline applicants who do not meet our requirements and/or placement criteria.