



VOLUNTEER REGISTRATION – SUNDAY 9th May 2010

All volunteers must be signed up by Tuesday, May 4th, 2010 either by form or letting me know.

Name _____

Street Address _____

City / Postal Code _____

Home Phone _____ Work Phone _____

Cellular Phone _____ Email Address _____

Do you have a medical condition/disability that we should be aware of? If yes, please briefly describe _____

Have you volunteered at a Homeless Connect before?

Yes No

Please select what shift you are available to volunteer for:

9am- 1pm 12pm- 3pm

Please note you are volunteering for a general volunteer position.

Any additional information you would like us to know?

Person to Notify in Case of Emergency:

Name _____ Contact Number _____

THANK YOU FOR VOLUNTEERING FOR

HOMELESS CONNECT EDMONTON Sunday 9th May 2010 at the SHAW CONFERENCE CENTRE.

A reply confirmation will be sent to you on receipt of your application.

or

Volunteer online at www.homelessconnect.ca

Please send your application to Sonya Helms, Communications Assistant, Homeward Trust,
shelms@homewardtrust.ca Fax 780 496 2634