

Future Leaders Mentorship Volunteer Application Winter 2025

	on		
Name			
Street Address			
City			
Phone #			
Email Address			
Date of Birth			
Availability			
•	are you available fo	or volunteering?	
Check all you are	Days	Location	Time
available for (X)	Mondays	Pitt Meadows Elementary	2:30pm** - 4pm
	Tuesdays	Golden Ears Elementary	2:30pm** - 4pm
		Lioinioniany	
	Wednesdays	Pitt Meadows Elementary	2:30pm** - 4pm
	Wednesdays Thursdays	Pitt Meadows Elementary Golden Ears	2:30pm** - 4pm 2:30pm** - 4pm
*Start time can be	Thursdays	Pitt Meadows Elementary	2:30pm** - 4pm
	Thursdays flexible due to bell s	Pitt Meadows Elementary Golden Ears Elementary	2:30pm** - 4pm



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Previous Volunteer Exp	perience
Summarize your previous	s volunteer or work experience, if applicable.
Person to Notify in Case	e of Emergency
Name	
Street Address	
City	
Cell Phone	
Work Phone	
E-Mail Address	
Agreement and Signatu	ıre
By signing this application understand that if I am ac	n, I confirm that all information is accurate and complete. I coepted as a volunteer, any false statements, omissions, or made by me on this application may result in my immediate
dismissal.	made by the on this application may result in my inimediate
Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in becoming a volunteer!