



## Serving Stratford & Area

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### VOLUNTEER APPLICATION

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

#### **IN CASE OF EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship: \_\_\_\_\_

#### **Volunteer Opportunities:**

Below is the list of the areas available. Please check off any that are of interest to you.

- Christmas Kettles** (Months of Nov. & Dec.)
  - Kettle Worker** – Greets people at one of our kettles.
  - Driver** – Checks on kettle workers/small pick-ups, etc.
  
- Christmas Toy Depot** (Months of Nov. & Dec.)
  - Setup Crew** – Sorts toys and stocks shelves
  - Personal Shopper** – Assists parents with shopping experience
  - Hospitality Support** – Greets parents, oversees snacks and beverages, etc.
  
- Christmas Food Hamper** (Dec.)
  - Hamper Helper** – Receives and fetches hampers for pick-up.
  
- Special Events**
  - Food Drive Worker** – Greets people at drop off location.
  
- Thrift Store** – help with various tasks around the store, which may include: stocking shelves, cleaning, sorting items, etc.
  
- Food Bank** – help with sorting food, stocking shelves, packing bags, etc.

**Availability:**  Anytime

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						
Evening						

**Length of Volunteer Commitment:**

- Less than 6 months     More than 6 months     Special Event/Project

**Previous Volunteer Experience:**

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**Educational/Training Background:**

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**Employment Experience:**

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**How did you hear about our program:**

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**Skills You Have To Offer:**

- Works well with others     Creative Thinking     Organizational Skills  
 Computer Knowledge     Office Procedures     Drive a Vehicle  
 Physically Fit     Other: \_\_\_\_\_

**Reasons for Volunteering:**

- Skill/career development     Meet People     Help Others  
 Learn New Skills     School/Course Credits     Community Service Hours  
 Want to Keep Busy     Other: \_\_\_\_\_

**References:**

Please supply two references other than family members

- 1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship: \_\_\_\_\_
- 2. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**AGREEMENT:**

If accepted as a Salvation Army volunteer, I agree to the following:

- 1. To participate in designated training session when provided to help my volunteer assignment.
- 2. To maintain strict confidentiality.
- 3. To wear required identification when on duty.
- 4. To adhere to the smoke free environment.
- 5. To support the principles of The Salvation Army and the implementation of the mission of The Salvation Army while on duty as a volunteer.
- 6. To give The Salvation Army permission to contact the above named references.
- 7. To agree to a police check and driver's record if necessary.
- 8. To fulfill the volunteer hours agreed upon.
- 9. To provide my time and service without remuneration.

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

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**FOR OFFICE USE:**

Meeting Date: \_\_\_\_\_ Volunteering for: \_\_\_\_\_  
Accepted by: \_\_\_\_\_

**THE SALVATION ARMY  
STRATFORD VOLUNTEER PROGRAM**

**WAIVER OF LIABILITY**

The Salvation Army agrees to treat all volunteers with dignity and respect, having due regard for their personal safety and their personal property while they are serving as volunteers.

To that end, The Salvation Army will take reasonable steps necessary to ensure a safe and secure working environment for all individuals, including volunteers.

While volunteers will not knowingly be placed in unsafe situations or exposed to unnecessary risk, it is recognized that accidents or losses occasionally happen which cannot be attributed to any fault on the part of any one individual or organization.

The purpose of this document is to release The Salvation Army from liability for accidents, injuries, losses and damage which may occur in the course of providing volunteer services, where such accidents, injuries, losses or damage are not caused by negligent acts or omissions on the part of The Salvation Army.

**As a volunteer participant in the delivery of Salvation Army programs and services, I agree to the following:**

1. The Salvation Army will not be required to compensate me for any harm or loss suffered as a result of my participation in the provision of volunteer services, whether that be harm such as illness, injury or death, or loss of or damage to personal property unless such harm or loss is caused by negligent acts or omissions on the part of The Salvation Army or those for whom it is legally responsible.
2. I relinquish any right I might have to claim compensation from The Salvation Army for any harm or loss suffered by me in connection with the provision of volunteer services except if such harm is caused by negligent acts or omissions of The Salvation Army or those for whom it is legally responsible.
3. Any reference to The Salvation Army in this document shall include The Salvation Army Canada and Bermuda Territory, The Governing Council of The Salvation Army in Canada, and all associated charities, divisions and unincorporated associations, as well as all officers, employees and volunteers of any of them.

I fully understand and agree to the terms set out in this document and I am signing it voluntarily.

\_\_\_\_\_  
Volunteer

\_\_\_\_\_  
Witness

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