



Volunteer Application Form

Personal Information

Today's Date _____

First Name _____

Last Name _____

Address _____

City _____ Province _____ Postal Code _____

Home Phone _____

Cell Phone _____

E-mail Address: _____

How did you hear about Adsum?

What are you interested in doing at Adsum? [Check all that apply]

- organizing clothing room
- sorting donations
- meal preparation
- holiday meal preparation
- baking
- light housekeeping
- painting / home improvement projects

Special event help:

- Art show
- Tea party
- Dinner / silent auction
- Postering
- Administrative help

Relevant volunteer experience:

Availability

Volunteers typically work a 2-hr. shift per week.

Please indicate your availability between 9:00am and 8:00pm.

Sunday		Thursday	
Monday		Friday	
Tuesday		Saturday	
Wednesday		Notes	

References

Do not include relatives.

1. Name: _____
Organization: _____
Phone: _____
Email: _____
Relationship to you: _____

2. Name: _____
Organization: _____
Phone: _____
Email: _____
Relationship to you: _____

Thank you for your interest in being a part of the Adsum volunteer team!

Questions? Please call 423-5049.

Please print and return this form to:

Lindsey MacIsaac, Adsum for Women & Children
2421 Brunswick St. Halifax NS B3K 2Z4
fax 423-9336
email adsum@adsumforwomen.org

For office use only:

Police record check complete:
Child Abuse Registry check complete:
Orientation date:
Start Date:
Scheduled day / time: