

General Volunteer Application

Please scan & email this application form to contact@pakmen.com or mail it to 1703-350 Rathburn Road West, Mississauga, L5B 3Y2

Thank you for your interest in volunteering with the Pakmen Volleyball Club. Volunteers play a vital role in delivering an excellent experience for young volleyball players. In order to ensure fair distribution of our volunteer opportunities, we require the completion of this application form. Please read the FAQs on our website. Every applicant is required to provide two references. Please note that incomplete applications will not be considered. All qualifying volunteers will be considered for future opportunities.

Volunteer Information

Volunteer's First Name	Volunteer's Last	Name
High School or Post Secondary Institution	Grade or year (cu	urrent or entering)
City	Phone Number	
Email Address	Birth Date (Mont	h and Year)
Female Male Returning Volunt Have you ever played or currently play volley	ball? Yes No	Emergency Contact
Have you ever played for a Pakmen program? Do you enjoy interacting with young kids?		Relationship with Contact
		Emergency Phone Number
References		
1. Reference Name Relati	ionship (cannot be family)	Email Address
Comments:		
		Reference #1 Signature
Volunteer Signature		Date