

Erland Lee (Museum) Home

552 Ridge Road, Stoney Creek, 905-662-2691

www.fwio.on.ca/erland

volunteer.erlandleemuseum@gmail.com

VOLUNTEER APPLICATION FORM

Today's Date:			
Name of Volunteer:			
	Cell number:		
Email address:			
Emergency name and contact #:			
Medical conditions/allergies:			
How did you learn about this volunteer opportunity?			
Do you need to complete community or educational volunteer service hours?			
Why do you want to volunteer at the Erland Lee (Museum) Home?			
What volunteer roles interest you the mo	ost? Please check all that apply:		
Museum Docent/Tour Guide Gardening/Maintenance Other (if you have an idea, please let us	Special Events Gift Shop know!)_		



What is your availability? Please check	all that apply and p	provide details if necessary:
Weekdays Weeknights	Weekends	Special Events
Have you ever been convicted of a crir granted?	ninal offense for wh	ich a pardon has not been
*Depending on your volunteer role, a police your volunteer placement at the Erland Lee		ed and may be a condition of
Please provide two references (these r process):	eferences will be us	sed as part of our screening
Name:	_ Relationship to	you:
Phone #:		e #:
Email:		
Name:	_ Relationship to y	/ou:
Phone#:		#:
Email:		
If under the age of 18, please have a p well, please review and sign the attach For Volunteers under the age of 18:	ed confidentiality ag	•
1	givo	
(print name of parent/guardian)		rint name of volunteer)
permission to participate in the Volunteer I	Program at the Erland	d Lee (Museum) Home.
Parent/Guardian Signature:		

Thank you so much for your interest in volunteering your time at this National Historic Site! We look forward to discussing the opportunity with you soon!