

# THOMPSON VIEW MANOR SOCIETY

## MEMBERSHIP APPLICATION

### PERSONAL DATA:

Name: \_\_\_\_\_  
(Surname) (First)

Address: \_\_\_\_\_  
(Street number and name) (PO Box #) (City) (Prov) (Postal Code)

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Membership fee: \$10 per fiscal year (September-August)

### TYPE OF VOLUNTEER WORK DESIRED:

- Board member
- driving (resident appointments)
- evening programs
- shopping for residents
- games, bingo, cards
- crafts, knitting

**AVAILABILITY:** Please indicate times and days you are available to volunteer.

	<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thurs</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
Mornings	<input type="checkbox"/>						
Afternoons	<input type="checkbox"/>						
Evenings	<input type="checkbox"/>						

**SPECIAL INTEREST AND TRAINING:** (Business, Professional, Hobbies): \_\_\_\_\_

I have volunteered before with other organizations/clubs.  No  Yes, and they include: \_\_\_\_\_

I am currently volunteering with (list organizations and responsibilities): \_\_\_\_\_

### PERSONAL REFERENCES:

1. \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
(Name)

2. \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
(Name)

You may be asked to have a Criminal Record Check done for the Society's insurance requirements.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### Confidential When Completed

#### For Office Use Only:

Interview date: \_\_\_\_\_ Orientation: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Board Members Only: Police Information Check  Oath of Confidentiality  Sworn In