

## VOLUNTEER APPLICATION FORM

Please return this form to Kat at:

[volunteer@outonscreen.com](mailto:volunteer@outonscreen.com) OR fax: 604.844.1698 phone: 604.844.1615 OR  
#405-207 West Hastings Street, Vancouver, BC, V6B 1H7

Double click on the boxes to mark them as checked!

Name				Are you a returning volunteer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Address				Age range	<input type="checkbox"/> under 19 <input type="checkbox"/> 19-24 <input type="checkbox"/> 24+
City		Postal Code			
Phone (day)		Phone (night)		Is it OK to leave you a queer message	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email				Is it OK to list you in the program guide?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the best way to reach you?	<input type="checkbox"/> Email <input type="checkbox"/> Phone (day) <input type="checkbox"/> Phone (night) <input type="checkbox"/> Other:				
How did you find out about Out On Screen?					
Emergency contact name & number					
<input type="checkbox"/> I'd like more information on the benefits of donating to Out On Screen					

**I am generally available:**

- |                                              |                                               |
|----------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Monday – Friday     | <input type="checkbox"/> Saturday – Sunday    |
| <input type="checkbox"/> Mornings (10am-1pm) | <input type="checkbox"/> Afternoons (1pm-5pm) |
| <input type="checkbox"/> Evenings (5pm→ )    |                                               |

**What volunteer teams at Out On Screen interest you?**

(Full descriptions available at <http://www.outonscreen.com/content/Volunteer/17/4>)

<i>Year Round</i>			
<input type="checkbox"/> Office Partners	<input type="checkbox"/> Office Quickies	<input type="checkbox"/> Out in Schools	<input type="checkbox"/> Queer History Project
<input type="checkbox"/> Street Teams	<input type="checkbox"/> Graphic Designers	<input type="checkbox"/> IT Wizards	<input type="checkbox"/> Butches
<input type="checkbox"/> Drivers (must have own vehicle)	<input type="checkbox"/> Guide & Copy Editors	<input type="checkbox"/> Translators	<input type="checkbox"/> Lotto
<input type="checkbox"/> Pride Parade	<input type="checkbox"/> Programming Committee	<input type="checkbox"/> Hospitality Committee	<input type="checkbox"/> Photographers & Videographers

Office Use Only:

Date Received \_\_\_\_\_  A  E  O

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<i>11-days of Festivals only (August 13-23, 2009)</i>			
<input type="checkbox"/> Parties & Special Events	<input type="checkbox"/> Venue Coordinators	<input type="checkbox"/> Ushers	<input type="checkbox"/> Box Office & Membership
<input type="checkbox"/> Accessibility & Greeter	<input type="checkbox"/> Line Control	<input type="checkbox"/> Set-up & Take down	

**Do you have any of these focused skills?**

<input type="checkbox"/> certified ASL interpreter	<input type="checkbox"/> certified First Aid	<input type="checkbox"/> Serving It Right	<input type="checkbox"/> Programming Experience
<input type="checkbox"/> Microsoft Access	<input type="checkbox"/> Website Design	<input type="checkbox"/> Adobe InDesign	<input type="checkbox"/> Fundraising
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Fluent in other language(s):			
<input type="checkbox"/> Translate English into:			

**Vehicle (check only if applies)**

I have a perfect driving record and up-to-date license and would be willing to be a volunteer driver.

I have a  car  truck that I am willing to volunteer to drive for Out On Screen.  
(We offer \$0.30/km in mileage reimbursement)

**Other**

Is there anything we might need to know in order to help us make Out On Screen more accessible to you as a volunteer? (e.g. use a wheelchair or scooter, hearing impaired, can't sit/stand for long periods)

Do you have any other comments regarding your interests / volunteering?

What do you hope to get out of volunteering?

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Date Received \_\_\_\_\_  A  E  O