



## VOLUNTEER APPLICATION FORM

NAME: \_\_\_\_\_ PRIMARY PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ BEST WAY TO CONTACT YOU: \_\_\_\_\_

PRIMARY ADDRESS: \_\_\_\_\_

(PLEASE INCLUDE CITY, PROVINCE & POSTAL CODE)

YEAR OF BIRTH: \_\_\_\_\_

(PLEASE NOTE THAT IF YOU UNDER 18, A LEGAL GUARDIAN IS ALSO REQUIRED TO SIGN THE APPLICATION FORM)

### WHICH VOLUNTEER EVENTS ARE YOU INTERESTED IN?

FRONT OF HOUSE USHERS

-WE HAD A GIRL BEFORE YOU **NOVEMBER 5 - 21/2020**

-THE LOOK **JANUARY 13- FEBRUARY 6/2021**

-SOMETHING UNSPOKEN **APRIL 14 – MAY 1 /2021**

-THE UGLY DUCHESS **MAY 6 – MAY 22 /2021**

FUNDRAISING EVENTS

-WE ALL NEED A LITTLE LOVE FUNDRAISER **FEB 13/2021**

FUNDRAISING BINGOS AND CASINOS, UPCOMING DATES ARE AVAILABLE ON NLT'S WEBSITE

FUNDRAISING EVENTS AND/OR GENERAL OFFICE SUPPORT

MORE INFORMATION ON THE ROLES AND RESPONSIBILITIES FOR EACH VOLUNTEER POSITION, INCLUDING NLT'S COVID-19 PROTOCOLS ARE AVAILABLE ON THE VOLUNTEER PAGE OF NTL'S WEBSITE.

APPLICABLE TRAINING IS PROVIDED BEFORE EACH VOLUNTEER SHIFT.

### DO YOU HAVE ANY OF THE FOLLOWING CERTIFICATIONS/ QUALIFICATIONS?

PRO-SERVE CERTIFICATE: YES OR NO

FIRST AID (CPR-C & SFA OR EQUIVALENT): YES OR NO

IF YES TO ANY OF THE ABOVE, PLEASE ATTACH YOUR CERTIFICATION.

WHAT LANGUAGES DO YOU SPEAK OTHER THAN ENGLISH? \_\_\_\_\_

### OTHER WAYS TO GET INVOLVED WITH NORTHERN LIGHT THEATRE

ARE YOU INTERESTED IN BECOMING A NORTHERN LIGHT BOARD MEMBER OR COMMITTEE MEMBER?

YES, I WOULD LIKE TO LEARN MORE ABOUT BECOMING AN NLT BOARD OR COMMITTEE MEMBER

YOU CAN ALSO REFER TO THE 'ABOUT US – MEET OUR BOARD OF DIRECTORS' SECTION OF NLT'S WEBSITE:

[www.northernlighttheatre.com](http://www.northernlighttheatre.com) OR CALL NLT'S OFFICE AT 780-471-1586 FOR ADDITIONAL INFORMATION

### AVAILABILITY (PLEASE CHECK AND INSERT TIMES IF APPLICABLE)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							



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## PERSONAL ACCOMMODATIONS

IS THERE ANYTHING ELSE YOU WOULD LIKE US TO KNOW ABOUT YOU?

PRONOUN: HE / SHE / THEY/THEM / OTHER: \_\_\_\_\_

ADDITIONAL SKILL SETS/ PAST VOLUNTEER EXPERIENCE/ STRENGTHS/ LIMITATIONS/ ETC.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU REQUIRE ACCOMMODATIONS FOR MOBILITY? IF YES, PLEASE PROVIDE ADDITIONAL DETAILS ON HOW WE CAN SUPPORT YOU AS A VOLUNTEER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU HAVE ANY ALLERGIES OR DIETARY RESTRICTIONS? (WE DO OUR BEST, BUT IT'S NOT ALWAYS POSSIBLE TO ACCOMMODATE SPECIALTY DIETS):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMERGENCY CONTACT INFORMATION (OPTIONAL):

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_  
OF GUARDIAN REQUIRED IF 18 YEARS OR YOUNGER

SIGNATURE \_\_\_\_\_

THANK YOU FOR FILLING OUT NLT'S VOLUNTEER FORM

PLEASE EMAIL YOUR COMPLETED FORM TO: [gina.m@northernlighttheatre.com](mailto:gina.m@northernlighttheatre.com)

OR MAIL TO: #203, 10816A, 82 AVE, EDMONTON, AB., T6E 2B3

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