

# Volunteer Application

Community & Visitor Engagement Volunteer  
 Airport (YLW)

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

E-mail Address **(Required)**: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone Number: \_\_\_\_\_

Birthday (MM/DD): \_\_\_\_ / \_\_\_\_

Do you have BC Medical Services Plan (MSP) or other medical coverage? (Please Circle) Y / N

Where did you learn about this volunteer opportunity? \_\_\_\_\_

Please list any previous volunteer experience: \_\_\_\_\_

Why would you like to volunteer with Tourism Kelowna? \_\_\_\_\_

Please list any skills, qualifications or experience you can offer to this position: \_\_\_\_\_

Please list any languages you speak: \_\_\_\_\_

Will you be driving to your volunteer shift: Yes / No

**If you are interested in volunteering immediately please fill out the area below:**

What is your desired time commitment (Circle all that apply): Weekly Bi-Weekly

What days of the week are you available (Circle all that apply):

Monday	8:00-12:00 / 12:00-4:00 / 4:00-8:00	Friday	8:00-12:00 / 12:00-4:00 / 4:00-8:00
Tuesday	8:00-12:00 / 12:00-4:00 / 4:00-8:00	Saturday	8:00-12:00 / 12:00-4:00 / 4:00-8:00
Wednesday	8:00-12:00 / 12:00-4:00 / 4:00-8:00	Sunday	8:00-12:00 / 12:00-4:00 / 4:00-8:00
Thursday	8:00-12:00 / 12:00-4:00 / 4:00-8:00		

Please return your completed form to the attention of Angelina Scott, Volunteer & Events, to:  
 238 Queensway Avenue, Kelowna, BC V1Y 6S4 or e-mail to: [angelina@tourismkelowna.com](mailto:angelina@tourismkelowna.com)

**Staff Use Only**

Date Received: \_\_\_\_\_

Interview Date: \_\_\_\_\_

Added to Master Spreadsheet: \_\_\_\_\_

Added to Anniversaries Spreadsheet: \_\_\_\_\_

Added to Simpleview: \_\_\_\_\_

Nametag Ordered: \_\_\_\_\_