



IIFA Volunteer Registration Form

First Name: _____
Last Name: _____
Street Address/Unit/Apt: _____
City: _____
Postal Code: _____
Home Phone: _____
Work/Cell Phone: _____
E-Mail: _____

Volunteer Privacy Statement:

IIFA respects your privacy. We protect the personal information you provide us and adhere to all legislative requirements. We will not provide your name and address to external organizations. If you have any questions or concerns regarding the IIFA Privacy Policy, please write in to BLANK.

If I am selected to be an IIFA Volunteer, I understand that I am expected to be:

Informed

- I shall attend all necessary training sessions to ensure I know what my specific position entails. I understand that I will be working under the supervision and guidance of an IIFA staff member or an experienced volunteer. I will be expected to work both independently and as part of a team.

Friendly

- As a representative of IIFA I will work extensively and in a respectful manner with patrons, staff and other volunteers. I agree to comply with IIFA's policies. I agree to be courteous to everyone I encounter.

Professional

- As an IIFA representative, I will adhere to the Volunteer Confidentiality Policy. While on shift I agree to conduct myself in a professional manner at all times. I do not expect to participate in IIFA events during or after my volunteer shifts as a result of my position in the program.

Committed

- I shall arrive on time for my agreed upon shifts and work diligently with IIFA staff and volunteers. I will be prepared to work long at late hours if required.

Positive

- I will inform the Volunteer Office or my staff supervisor of any problems with my assignment(s) or volunteer experience in order to help foster a fun and positive experience for all volunteers.

In addition to this, I understand that I will need to:

- Arrange my own transport in the event that my shift times are not conducive to public transport
- Pay my own expenses
- Wear the 'Friends of IIFA' volunteer t-shirt and carry my IIFA identification at all times during my shifts
- Use my cell phone in my capacity as a volunteer (for local calls only) and be prepared to pay any expenses arising from its use

In order to be eligible as a volunteer for IIFA, I understand that I must be 18 years of age or older. If I prove to be unsuited to a volunteer position. I understand that IIFA reserves the right to reassign or cancel any or all of my volunteer shifts. I understand that IIFA is not liable for any damages or injuries I incur while volunteering for the organization or one of its divisions.

Please print clearly. Personal information supplied here will only be used to facilitate your participation in this volunteer program and will not be shared with any other organizations.

Signature: _____

Date: _____