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BALLET BC VOLUNTEER APPLICATION

Date: _____

Name:	Email:
Address:	Home phone:
City:	Work phone:
Postal Code:	Cell phone:

AVAILABILITY AND INTEREST

- Show evenings (Thursday /Friday /Saturday)
- Administrative help in our office (weekdays between 9am and 5pm)
- Receptions/Development events (usually from 3pm - 8pm on weekdays)

What other skills, interests should we be aware of when finding opportunities for you? If you have any physical limitations (lifting, standing, climbing stairs, etc.), please list them here.

Have you/do you volunteer for other organizations? If yes, please list them here.

PLEASE RETURN THIS FORM TO:

**Noni Raskin, Volunteer Coordinator, Ballet BC
601 Smithe Street, Vancouver, BC V6B 5G1
Email: officecoord@balletbc.com**