



23 Second St. Unionville ON L3R 2C2 | 905-477-3838 | bethanylodge.org

Adult Volunteer Application

Date: _____

Name _____

Email: _____ Phone: _____

Address: _____

Birth Date: MMM/DD _____ Alternate Phone: _____

How did you find out about Bethany Lodge? _____

Why would you like to volunteer? _____

Do you have any medical conditions we should be aware of? _____

Do you have any special skills or interests? Hobbies? Do you speak another language? Are there special areas you would like to serve in?

Emergency Contact

Name: _____ Relationship: _____

Email: _____ Phone: _____

Please complete this form. You may fax it to 905-477-2888, email it to lynnef@bethanylodge.org, or drop it off at the Reception Desk. We will connect and schedule an interview.