[SAMPLE] Volunteer Form

TheatreTO

2025-2026

ISSUED BY

YOUR COMPANY NAME

REPRESENTATIVE

YOUR NAME

YOUR EMAIL

YOUR PHONE

Volunteer Form

About the Opportunity
 [DESCRIPTION OF EVENT/PROJECT] is looking for volunteers to help with [DESCRIPTION OF TASKS]. Our goals are:

- [GOAL 1]

- [GOAL 2]

- [GOAL 3]

- [GOAL 4]

We welcome volunteers who are enthusiastic, reliable, and ready to support our team.

Volunteer Information

Full Name: _____
 Preferred Name/Nickname: _____
 Email: _____
 Phone Number: _____
 Address: _____
 Date of Birth (optional): _____

Availability

- Days Available: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

- Times Available: ☐ Morning ☐ Afternoon ☐ Evening

- How many hours per week can you volunteer? _____

Skills and Experience

- Relevant Skills or Certifications: _____

- Previous Volunteer or Work Experience: _____

- Areas of Interest: ☐ Event Setup ☐ Registration ☐ Social Media ☐ Fundraising ☐ Teaching ☐ Other: _____

Emergency Contact
Name: _____
Relationship: _____
Phone: _____
Alternate Phone: _____

Volunteer Agreement

- I agree to volunteer my time and efforts to [COMPANY NAME] in a safe and responsible manner.

- I understand that my participation is voluntary and I am not entitled to payment.

- I consent to [COMPANY NAME] contacting me about volunteer opportunities and updates.

- I give permission for photos or videos of me volunteering to be used for promotional purposes.

- I understand that [COMPANY NAME] reserves the right to dismiss volunteers who do not follow safety guidelines or behave inappropriately.

Signature: _____

Date: _____

_____

Optional Questions

- How did you hear about us? _____

- Why do you want to volunteer? _____

- Do you have any medical conditions or accessibility needs we should know about? _____

- Any additional comments or information: _____