



Making good things happen in our community!

VOLUNTEER REGISTRATION FORM

NOTE – The following information is required for safety reasons as well as for administrative follow-up. The information provided on this form will be entered into BVO’s database and may be used by BVO staff and volunteers for BVO related business. Otherwise, this personal information will be held in strict confidence in accordance with BVO’s Privacy Code.

PLEASE PRINT

DATE:

Last Name	First Name
Address	
Telephone 1	Telephone 2
E-Mail Address	
BVO has my permission to send me BVO related emails. <input type="checkbox"/> Yes <input type="checkbox"/> No You may unsubscribe at any time.	
Emergency Contact	Telephone for Emergency Contact
Work Experience	
Volunteer Experience	
Medical Information: Please give us any medical information you would like us to know (allergies, medic alert bracelets, etc):	
How did you hear about Beaver Valley Outreach? <input type="checkbox"/> Word of mouth <input type="checkbox"/> Media <input type="checkbox"/> Event <input type="checkbox"/> BVO Website <input type="checkbox"/> Other _____	
----- Please initial here to signify that BVO has the right to use any pictures of you which may be taken during your volunteer hours for our website, newspaper or any other media publication	

AVAILABILITY: Please indicate by placing an “x” in the appropriate box, when you are available to volunteer.

	SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.
Morning							
Afternoon							
Evening							

Are there any times of the year that you are NOT available to volunteer? [Example – Do you go south for the winter months or do you go away for the summer?]

CRIMINAL REFERENCE CHECKS

The Executive Director or Designate will provide you with the requisition(s) for this process and you will return the completed report to her/him directly, at which point the completed form(s) will be placed in a locked file cabinet.

Criminal Reference Check

All BVO Volunteers must provide a current Criminal Reference Check

Vulnerable Sectors Criminal Reference Check

All BVO Volunteers working with minors and seniors must also provide a current Vulnerable Sectors Criminal Reference Check

Please initial to indicate you have read this requirement. _____

CODE OF CONDUCT

All volunteers are expected to meet and follow the following standards of conduct:

- I shall fulfill my obligations and responsibilities with integrity.
- I shall protect the privacy of those who use the services of BVO and hold in confidence all acquired information concerning clients, staff, board members, donors and volunteers.
- I shall serve clients in a friendly, respectful, conscientious and efficient manner.
- I shall treat other BVO volunteers, staff and board members with respect and work co-operatively with them.
- I shall treat Beaver Valley Outreach, its services and programs with dignity and respect and conduct myself in a manner conducive to the well-being of the organization.

OATH OF CONFIDENTIALITY

All volunteers are expected to take an oath of confidentiality:

- I will not engage in discussion of situations or cases within or outside of BVO except on a need to know basis as is required for the appropriate conduct of Beaver Valley Outreach.
- I undertake, as part of the condition of my volunteer placement, to keep in strict confidence any information concerning participants of BVO programs and services or any persons who donate to BVO.

HARASSMENT POLICY

All volunteers and staff, as well as our clients are expected to follow the following policy:

- BVO is committed to providing a harassment free environment.
- Mutual respect must be the basis of interaction, cooperation and understanding.
- Behaviour that is likely to undermine the dignity or self-esteem of an individual or create an intimidating, hostile or offensive environment will not be tolerated. Prohibited grounds under the Ontario Rights Code include - race, sex, age, marital status, sexual orientation and disability.

I, _____[Print name of volunteer], have read, understood and agree to abide by the provisions of the Beaver Valley Outreach code of ethics and agree to the oath of confidentiality and harassment policy.

Volunteer Signature _____

Date _____

Witness Signature _____

Date _____

Print Name of Witness _____