



Volunteer Information Form *Relay For Life Version*

I am a NEW ____ or CURRENT ____ volunteer
Year started with Canadian Cancer Society: _____

CONTACT INFORMATION

Date: _____
 (mm / dd / yyyy)

Name: _____
 (first) (middle initial) (last)

Address: _____ **Apt.** _____

(city) (province) (postal code)
Phone (home): (_____) _____ **Phone (bus.):** (_____) _____

E-mail: _____

Emergency contact name: _____ **Phone:** (_____) _____

How did you learn about volunteering with the Canadian Cancer Society *Relay For Life*?

- | | |
|--|---|
| <input type="checkbox"/> a friend/acquaintance approached me | <input type="checkbox"/> family/friends used services in the past |
| <input type="checkbox"/> media (including messages on TV, radio and newspaper) | <input type="checkbox"/> at a special event |
| <input type="checkbox"/> from materials displayed in my community | <input type="checkbox"/> Volunteer centre/Employment centre |
| <input type="checkbox"/> website (site name: _____) | <input type="checkbox"/> other: _____ |

Languages spoken: English French other: _____

Languages written: English French other: _____

VOLUNTEER INTERESTS

Please tell us what type of volunteer positions might interest you.

Check all that apply.

- | | | | |
|---------------------------------|--------------------------|-------------------------|--------------------------|
| Luminary set-up or take-down | <input type="checkbox"/> | Team services | <input type="checkbox"/> |
| Site set-up | <input type="checkbox"/> | Site take-down | <input type="checkbox"/> |
| Food services | <input type="checkbox"/> | Leadership | <input type="checkbox"/> |
| Security | <input type="checkbox"/> | Entertainment | <input type="checkbox"/> |
| Registration | <input type="checkbox"/> | Cancer information tent | <input type="checkbox"/> |
| Wherever my help is most needed | <input type="checkbox"/> | | |

T-SHIRT INFORMATION

Volunteers at *Relay For Life* receive t-shirts. Please indicate the size you would like

T-Shirt size (only choose one size): M L XL XXL

EVENT INFORMATION

Please specify the event location and date that you would like to volunteer:

Event location: _____ **Date:** _____

VOLUNTEER AGREEMENT

At all times, the mission, vision and philosophy of the Society will be followed in accordance with the Society's policies, standards and guidelines. As a volunteer of the Canadian Cancer Society, I may have access to information and documents relating to clients, donors, volunteers and staff that are private and confidential in nature; reasonable care and caution will be exercised to protect and maintain total confidentiality.

By volunteering at a Canadian Cancer Society event: I grant permission to the Canadian Cancer Society to photograph and videotape me in the course of my volunteer involvement in the event, and to use my name and any photographs and videotapes of me for Canadian Cancer Society purposes in any media and territory in perpetuity. I waive and release any and all claims for myself, my heirs, executors and administrators against the Canadian Cancer Society, its agents, employees and licensees and any sponsors, officials, volunteers and organizers of the event in conjunction with any injury, illness, or death, or loss or damage to property, which may directly or indirectly result from my volunteer involvement in this event, and any claim arising in connection with the use of my name or any photographs or videotapes of me. I acknowledge that I will not receive any financial remuneration for any of the above and that my compensation is the opportunity to volunteer for the event and contribute to the activities of the Canadian Cancer Society. If a volunteer is under 18 years of age then a parent/guardian must sign this Agreement on the volunteer's behalf.

By signing below, you acknowledge that the information provided is true and accurate, that you have read and understand this volunteer agreement and have read and will abide by the EFFA code (see below)

Signature: _____ Date: _____

Signature of parent/guardian (if under 18): _____

ETHICAL FUNDRAISING AND FINANCIAL ACCOUNTABILITY CODE

The Canadian Cancer Society has adopted the Ethical Fundraising and Financial Accountability Code developed by the Canadian Centre of Philanthropy. In adopting the code the Society has committed to respecting donors rights to truthful information, privacy, responsible management of funds and accurate financial reporting.

Volunteers, employees, independent fundraisers and event participants who solicit or receive funds on behalf of the Canadian Cancer Society shall:

- adhere to the provisions of the EFFA code
- act with fairness, integrity and in accordance with all applicable laws
- adhere to the provisions of applicable professional code of ethics, standards of practice, etc.
- cease solicitation of a prospective donor who identifies the solicitations as harassment or undue pressure
- disclose immediately to the Canadian Cancer Society any actual or apparent conflict of interest
- not accept donations for purposes that are inconsistent with the Society's objects or mission

For more information about the Ethical Fundraising and Financial Accountability Code please refer to a copy of the code available at the event, contact your local unit/branch office or refer to EFFA website at: http://www.ccp.ca/files/ethicalcode/ethical_code.pdf

PLEASE RETURN FORM TO YOUR LOCAL CANADIAN CANCER SOCIETY OFFICE:

Sudbury & District Unit
1780 Regent Street South
Sudbury, ON P3E 3Z8
T(705) 670-1234 ext. 230 F (705) 670-1200

The Society collects your personal information in order to help identify suitable volunteer opportunities for you. Only authorized Society staff and/or volunteers access this information. We may also contact you from time to time to ask for your help by providing financial support in our fight against cancer. If you prefer not to receive this kind of communication from us or for more information about our privacy policy www.cancer.ca 1-800-268-8874, press 1, x2257 * e-mail: privacy@ontario.cancer.ca