



Comox Valley Exhibition Association, Fall Fair

VOLUNTEER APPLICATION FORM

info@cvex.ca 250-338-8177 www.cvex.ca

Name: _____
Address: _____ City: _____
Postal Code: _____ Telephone: home _____ cell _____
Email: _____

Age: ___ Under 19 ___ 20-65 ___ Over 65

Please check areas of interest throughout the year

Special events (dances, parking)	Policy Development	
Volunteer Coordination/Support	Fundraising/raffles	
Accounting/Bookkeeping	Community Development	
Website Design/Update	Organizing Exhibition Events	
Office Support	Inventory Control	

Please check areas of interest during the Exhibition

Set up and takedown	Greeter/Cart Driver	
Information booth	Home and Garden	
Gate ticket sales	Photography/Video	
Office reception and support	Kids Zone	
Volunteer Coordination/Support	Dog Sports	
Parking	Floater/runner	
Camping and stalls	Waste control	
Raffle Support and prize payout	Security	
Poultry	Other:	

Please provide two non-relative references

Name:	Name:
Phone:	Phone:
Relationship:	Relationship:

**Please note that a security check may be required for certain volunteer positions.
Volunteers under 19 need parental signatures.**

Signature

Date

You too can make a difference.