



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 _____

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.