



Comox Valley Exhibition Association, Fall Fair

**VOLUNTEER APPLICATION FORM**

[info@cvex.ca](mailto:info@cvex.ca) 250-338-8177 [www.cvex.ca](http://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.**