

ST. VLADIMIR INSTITUTE

620 Spadina Avenue
Toronto, Ontario M5S 2H4
Telephone: (416) 923-3318
Fax: (416) 923-8266

VOLUNTEER APPLICATION

Name Information (please print)

Preferred Title: (Mr. Mrs. Miss., etc)

Given Name:

Surname:

Address:

Street

City

Postal Code

Home Phone: ())

Work Phone: ())

Fax: ())

E-Mail:

Volunteer Information

Please indicate your preference(s) for volunteering by completing the information below:

Volunteer position(s) of interest or type of volunteer work you would like to do:

Board of Directors
Committee member
Bingo helper

Mailing
Occasional
Assigned project

Brief details of your background and experience:

Remarks or comments: