BSC PROGRAM VOLUNTEER - APPLICATION FORM

| Season | | | | | |
|--|--------------|-------------|--------------|--|--|
| Summer Outdoor (May – Sept) 🛛 Fall Indoor (Oct-Dec) 🗍 Winter Indoor (Jan-Mar) | | | | | |
| | | | | | |
| Program | | | | | |
| Embracing Abilities Lil' Burli Soccer School Summer Camps GK Program | | | | | |
| | PA Day Camps | March Breal | < Camps | | |
| CONTACT INFORMATION | | | | | |
| First Name | | | Last Name | | |
| Address | | | - | | |
| City | | | Postal Code | | |
| Email | | | Phone Number | | |
| Date of Birth (OSA Requirement) | | | | | |
| Have you had a valid Police Check in the last 3 years? | | | | | |
| *Valid Police Checks are required by all coaches 18 years of age and older. A copy must be submitted to the BSC office before the start of the house league season | | | | | |
| If you are applying to coach in any of our 'Camp' Programs, please outline availability below: | | | | | |
| | | | | | |
| | | | | | |



PREVIOUS VOLUNTEER EXPERIENCE:

Name of Program Volunteer (Print)

Signature of Program Volunteer

Date

RETURN TO: Samantha Stewart at <u>sstewart@burlingtonsoccer.com</u> OR in person to the Burlington Soccer Club Office at 3390 South Service Road, Suite 104, Burlington ON L7N 3J5.

