



# EDMONTON PRIDE FESTIVAL SOCIETY

# VOLUNTEER APPLICATION

FIRST NAME	LAST NAME	Current Member of the EPFS YES [ ] NO [ ]	
STREET ADDRESS	CITY	PROVINCE	POSTAL CODE
HOME PHONE #	CELL PHONE #	E-MAIL ADDRESS	
Previous years of volunteering with EPFS	AFFILIATE (if applicable)	Are you of Legal Age [ ] YES [ ] NO	
Preferred Area	Would you like your information shared with other GLBT Organizations YES [ ] NO [ ]	T-SHIRT SIZE S [ ] M [ ] L [ ] XL [ ]	
Please list any particular skills that you would like EPFS to be aware of:			
Please indicate your availability (check all that may apply) : FESTIVAL ONLY [ ] : ALL YEAR [ ] : WEEK days [ ] evenings [ ] : WEEKENDS days [ ] evenings [ ] : OTHER [ ]			
DATE	VOLUNTEER SIGNATURE	This space for office use only	
Information Verified by PHONE [ ] E-MAIL [ ]	DIRECTOR SIGNATURE	Posted to Registry Date	

PO Box 35032, 10818 Jasper Ave  
Edmonton, AB, Canada T5L 1W7

Once you have completed all the information on the Volunteer Application form, please click on the submit button.

Revision 01.24.2012

Please allow 10 days for processing. If you have not heard back from EPFS after that time, please feel free to contact [volunteers@edmontonpride.onmicrosoft.com](mailto:volunteers@edmontonpride.onmicrosoft.com)