



Name:	Street Address:
Email:	City:
Phone:	Mobile:
Emergency Contact:	Emergency Contact Mobile:

Applying as: (Please Check One)       **New Volunteer**       **Returning Volunteer**

**AGE GROUP:**       Under 18       Adult (18-55)       Senior (55+)       Coffee Kiosk

**Areas of Interest:**       Info Booth       Entrance / Exit       Set up/Take Down

**Assets and Abilities:**

**Type of work you would like to do:**

**Do you require a specific form/letter from us for volunteering at the JBM?** YES  NO

**If Yes, then what would you need:** \_\_\_\_\_

**Availability:** Please list specific dates for each month and the shift that you would like to volunteer for.

	Setup 7:30 – 9	AM Shift 8:30 – 11:45	PM Shift 11:45 – 3	Take Down 2:45 – 3:45
May				
June				
July				
August				
September				
October				

**The Market operates Rain or Shine from May 7 to Sept 24, 2022.** Our present hours are 9 am to 3 pm.

**AGREEMENT**

**Policy Manual:** <https://jamesbaymarket.com/policy.pdf>

**Constitution:** <https://jamesbaymarket.com/constitution-bylaws.pdf>

By signing below, I confirm that I have read the current James Bay Market Society Policy Manual as well as the Constitution and any updates thereof and will abide by all the policies outlined therein. I further confirm I have read and agree to abide by all the James Bay Community Market Rules and Regulations. I also give the JBMS permission to use images taken of myself only for the purposes of advertising the market to the public.

**Please email completed application to:** [Chair@jamesbaymarket.com](mailto:Chair@jamesbaymarket.com) **or mail to:**

Volunteer Coordinator - James Bay Market Society 547 Michigan Street Victoria BC V8V 1S5

**Thank you for sharing in creating community and supporting the James Bay Market Society.**

**SIGNATURE:**

Print

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_