



WHITE HAT VOLUNTEER APPLICATION FORM

PERSONAL INFORMATION

Name:		
Address:		
City:	Province:	Postal Code:
E-Mail:		
Home Phone:	Business Phone:	Cell Phone:
Current Occupation:		Previous Occupation:

VOLUNTEER INFORMATION

Please check the box for each statement that applies:

<input type="checkbox"/>	I am over the age of 18	<input type="checkbox"/>	I can work within a team and/or unsupervised
<input type="checkbox"/>	I am eligible for security clearance	<input type="checkbox"/>	I am fluent in the English language
<input type="checkbox"/>	I can commit to 150 hours per year (average of one four hour shift per week)	<input type="checkbox"/>	I am willing to comply with the White Hat Uniform (ie. Cowboy hat, red vest)

Why are you interested in becoming a White Hat Volunteer and what are you hoping to gain from this experience?

How did you hear about the White Hat Volunteer Program?

Please list any White Hat Volunteers that are already in the program that you may know:

Please provide additional information that may require special attention (ie. limited mobility, away for several months a year, etc.):

SHIFT AVAILABILITY & ACCOMMODATION

White Hat Volunteers are assigned to the **same four-hour** shift each week. Please select **all** days and times that you can commit to on a **regular basis**:

	SUN	MON	TUE	WED	THU	FRI	SAT
05:00 – 09:00							
09:30 – 13:30							
11:00 – 15:00							
14:00 – 18:00							
16:00 – 20:00							
18:00 – 22:00							

Shift placement is based on service time

REFERENCES

Name:	Relationship:	Phone:
Name:	Relationship:	Phone:

I certify that the statements made in this Volunteer Application are true and correct and have been given voluntarily. I understand that the information may be disclosed to any party with legal and proper interest and I release the Calgary Airport Authority from any liability for supplying such information. I understand that falsification of any information contained in this application will be considered grounds for immediate dismissal from the program.

Applicant Signature

Date

PLEASE RETURN COMPLETED FORM TO:

Western Hospitality
2000 Airport Road NE
Calgary, AB T2E 6W5
Fax: 403.735.1517
Email: WesternHospitality@yyc.com

If you have any questions, please contact our team at 403.717.3452

The Calgary Airport Authority complies with PIPEDA. By forwarding your application, you are consenting to the collection and use of your personal information for this volunteer opportunity. Your information will be kept confidential.

