



# Bingo Volunteer Application

Please fill out this form and we will get in touch with you shortly.

## Personal Information

---

**Full Name\*:**

**Address\*:**

Street Address:

City:

Region/ Province:

**Home Telephone Number:**

**Cell Number:**

**Email\*:**

## Questions about You

---

1. What experience have you had as a volunteer?

2. Do you possess any special skills or abilities that will be helpful to you as a Bingo volunteer? If so, what are they?

**3. Why do you wish to volunteer with Women's Support Network?**

--

**4. How did you find out about the Women's Support Network?**

--

**References**

We require 3 references be submitted with your application. Please complete the section below and let your references know we will be contacting them.

---

<b>Reference Name:</b>	
<b>Telephone Number:</b>	
<b>Email Address:</b>	
<b>Is this a personal or professional reference?</b>	
<b>If professional, what was their position?</b>	

<b>Reference Name:</b>	
<b>Telephone Number:</b>	
<b>Email Address:</b>	
<b>Is this a personal or professional reference?</b>	
<b>If professional, what was their position?</b>	

<b>Reference Name:</b>	
<b>Telephone Number:</b>	
<b>Email Address:</b>	
<b>Is this a personal or professional reference?</b>	
<b>If professional, what was their position?</b>	

**Volunteer Training Requirements:**

- At least 18 years of age
- Complete an Ontario Lottery and Gaming (OLG) training session before our first bingo shift - Training is available at <http://ncga.ca/> under "Charitable Gaming Volunteer Training"
- Ensure that you adhere to OLG dress code guidelines (WSN polo shirts provided)
- Complete 1-2 bingo shifts per month on Saturday afternoons from 12-3pm or 3-6pm

For more Information, please contact Gita at (905)895-3646 or at [gjavaheer@womenssupportnetwork.ca](mailto:gjavaheer@womenssupportnetwork.ca)