

FLUTTER BUYS THRIFT STORE

SUPPORTING KAMLOOPS HOSPICE



#14-1800 Tranquille Road, Kamloops, BC 250-376-1335

Email: demetra@kamloopshospice.com

Visit our website on www.kamloopshospice.com

Volunteer Application Form – Confidential

Date: _____

Name: _____ Phone Number: _____

Email: _____

Address: _____

Emergency Contact & Phone Number: _____

Present Occupation: _____

Previous Volunteer Experience: _____

Availability: _____

What special skills will you bring to Hospice: _____

Reference 1:

Name: _____ Phone Number: _____

Relationship: _____

Reference 2:

Name: _____ Phone Number: _____

Relationship: _____

Thank You for your application to join our team!

Please submit this application to Flutter Buys Manager in person or by email

Complete your Criminal Record Check through the following Online Link & Access Code
unique to Kamloops Hospice Association

Online Link: <https://justice.gov.bc.ca/eCRC/>

Access Code: LN7D7E5HFL

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For Administrative Purposes Only

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CRC Date: _____

CRC reviewed and returned to volunteer:

Orientation reviewed and given to volunteer:

Date: _____