



Volunteer application Form

Please print clearly

Name: _____

☎ Home ____ - ____ - ____ ☎ Other ____ - ____ - ____

Occupation : _____

Availability

Day	Monday	Tuesday	Wednesd ay	Thursda y	Friday	Saturda y	Sunday
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From							
To							

Weekly Every two weeks One week a month Special occasions

Please mention what you are offering, eg: translation, graphic design, website maintenance, etc.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Date: _____ (Day/Month/Year)

Please send it by e-mail or mail:

@ office@aseq-ehaq.ca

ASEQ-EHAQ, PO Box 364, Saint-Sauveur, Québec J0R 1R0

Thank you for your support!