



River Valley Resilience Retreat Inc.
Box 1382 Prince Albert, Sask. S6V 5S9
1-833-378-7775

Name *

Email

Prefix First Name Last Name example@example.com

Address

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

Phone Number

Area Code Phone Number

Why Do you want to Volunteer at RVR?

Next of Kin Details (for contact in an emergency)

Name

Phone Number

First Name

Last Name

Area Code

Phone Number

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

References

Please provide two references that are not family members as references.

Name

Phone Number

First Name

Last Name

Area Code

Phone Number

Email

How long have you known this person?

example@example.com

Name

Phone Number

First Name

Last Name

Area Code

Phone Number

Email

How long have you known this person?

Have you ever had a criminal record for which you have not recieved a pardon?

YES

NO

RVRR reserves the right to request a Criminal check at participants cost.

When is your Preferred Time to Volunteer With RVRR?

weekday

weekends

mornings

evenings

What do you think you can contribute to RVRR?

By affixing your signature to this application, you agree that all individuals are subject to any and all confidentiality clauses. This includes staff, patrons, and volunteers.

Signature and Date;



Office Info