

Volunteer Application Form- Elizabeth Fry Society of Saint John

Please take a few minutes to complete and return this application by fax or mail. Thank you.

Elizabeth Fry Society of Saint John
PO Box 23012
Saint John, N.B.
E2J 4M1
Phone/Fax: (506) 635-8851
efry@nb.aibn.com
www.efrysj.com

Personal Information (please print clearly):

Name: _____ Date: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Alternate Phone: _____

Email: _____

Program Interests

A. Direct Services

- Prison visiting:
 - Saint John Regional Correctional Centre
 - Nova Institution for Women
- Programs:
 - Mother/Child Read Aloud
 - Pet Therapy
 - Crafts
 - Bingo
 - Court Work
 - School Program
 - Assisting facilitator at a program

B. Other Interests

- Administrative work
- Outreach
- Research/Publications
- Fundraising
- Public Speaking
- Advocacy

____ Serving on Committees

General Interest

What personal interests or skills do you have that would help us to better assist our clients. We are interested in any ability/ideas/skills/hobbies etc.

Have you had any experience working with women, men, youth in conflict with the law or at risk? _____

Language Skills

I am able to speak, read and/or write in the following languages:

References

Please provide two professional references that are not related.

1. _____ Phone: _____

2. _____ Phone: _____

The Elizabeth Fry Society of Saint John provides training and orientation for all volunteers.

Please Read and Sign the Following:

I certify that the statements made by me in this application are true and complete to the best of my knowledge.

Name (please print): _____ Date: _____

Signature: _____