



# The Winter Club of St. Catharines

P.O Box 30002 111 Fourth Ave, St. Catharines, ON L2S 4A1, Phone (905) 641-5777 [www.skatewc.org](http://www.skatewc.org)

## Volunteer Registration Form September 8, 2009 – April 3, 2010

Each registration form must be accompanied by a completed Volunteer Form for registration to be completed.

All home club and non-home club members registering for a Test/Competitive skating session must submit a Volunteer Bond in the form of a \$120 cheque post-dated to Apr 3, 2010.

This cheque will be returned following the completion of 6 hours of volunteer time per family. Should you choose not to participate in our volunteer activities, your cheque will be cashed without notification and these funds will be utilized to cover club costs.

Please complete the following information:

Skater's Name:	Skater's Level
Home Club:	
Parent/Guardian Name	Contact Numbers: Home: _____ Work: _____ Other: _____
E-mail:	

Please check your first and second choices for volunteering. The information will be provided to the coordinators of the functions and you will be contacted to assess your availability.

1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	Volunteer Categories Please refer to the back of this form for an outline of the volunteer activities per category.
<input type="checkbox"/>	<input type="checkbox"/>	HOSPITALITY
<input type="checkbox"/>	<input type="checkbox"/>	COMPETITIONS
<input type="checkbox"/>	<input type="checkbox"/>	BINGO
<input type="checkbox"/>	<input type="checkbox"/>	FUNDRAISING
<input type="checkbox"/>	<input type="checkbox"/>	PLAYING MUSIC
<input type="checkbox"/>	<input type="checkbox"/>	AD HOC REQUESTS

**OR**

<input type="checkbox"/>	I am unable to volunteer and thereby authorize the Club to cash my Volunteer Bond at registration.
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Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Thank-you for supporting Team Winter Club.



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To assist in completing your choices, the following table identifies a sample of volunteer activities within each of the categories. Please circle any activity in which you have a particular interest. Every effort will be made to accommodate requests where possible.

CATEGORY	DESCRIPTION OF ACTIVITIES
<b>Hospitality</b>	<ul style="list-style-type: none"> <li>• Test Days - Volunteers are required to supply and prepare all food and beverages for judges. (Credit = 4 hours)</li> </ul>
<b>Niagara Region Competitions 2010</b> 1) Charles Dover – Grimsby, Jan 8-10 2) Synchro Championship - Fort Erie, Feb 12-14 3) Futures - East - NOTL, Mar 6-7	Various positions required for both competitions which may include: <ul style="list-style-type: none"> <li>• Registration</li> <li>• Admissions</li> <li>• Runners</li> <li>• Security</li> <li>• Ice Captains</li> <li>• Kitchen</li> </ul>
<b>Bingo</b> Currently held every second Tuesday from approx. 12:00 – 3:30 pm.	Selling bingo cards, paying out jackpots, counting money at Delta Bingo in St. Catharines. (Credit = 4 hours per bingo attended)
<b>Fundraising</b>	Time spent fundraising for the club including: <ul style="list-style-type: none"> <li>• Organizing a fundraising event</li> <li>• Sitting on Fundraising Committee</li> <li>• Selling Team Winter Club clothing</li> <li>• Assisting with Raffles</li> </ul>
<b>Playing Music</b>	Playing music at ice level for skaters and coaches on all sessions.
<b>Ad Hoc Requests</b>	There are various events held at the Club each year that require volunteers. Some examples include: <ul style="list-style-type: none"> <li>• Carnival / Gala</li> <li>• Annual Banquet</li> <li>• Special Skating Event Days</li> </ul> These events require a minimum number of volunteers.

**PLEASE NOTE THAT ALL MEMBERS ARE RESPONSIBLE FOR TRACKING THEIR VOLUNTEER TIME.**