



**STE. ANNE**  
MUNICIPALITY

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## Volunteer Sign-up Form - Emergency Services

**\*Volunteers must be over 18 years of age**

Personal information is collected under subsection 36 (1)(b) of the Freedom of Information and Protection of Privacy Act and is protected under the Act. It will be used for emergency contact information and will be shared with supervisors for the purposes of volunteer placement, orientation, training, supervision, and evaluation of the volunteer.

Full Name:			
Address:			
Phone #:		Cell Phone #:	
Email Address:			
Age:			

Emergency Contact Name and Relationship:			
Emergency Contact Phone #:		Cell #	

Your Occupation:			
Skills:	(languages spoken, logistical, organizational, communications, computer, counselling, specialty training, heavy equipment, cooking, medical, other)		
Emergency Training: If any please describe (not required but an asset if have)			
Task Preferences: (Operations Center, Registration, Children care, Animal care / rescue, Clean-up, Driver, Food Services, Other)			

Availability:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Other
Start Time:								
End Time:								

Resources:	(Car, Truck, Van, Heavy Equipment, Other)		
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Physical Limitations (if any): \_\_\_\_\_

\_\_\_\_\_

Have you ever been charged or investigated for any matter concerning the care or wellbeing of a minor under the age of 18?

☐ Yes                      ☐ No

Have you ever been charged or investigated for any matter concerning the care and wellbeing of a Vulnerable Adult?

☐ Yes                      ☐ No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_