




# OUT OF THE COLD VOLUNTEER PROFILE

(This Form For Out Of The Cold Use Only)


**PLEASE PRINT:**

<b>Site:</b>	<b>St Annes RC Church</b>		
<b>Name:</b>	_____		
<b>Address:</b>	_____		
	Street	Apt	City
			Postal Code
<b>Phone:</b>	_____		
	Home	Business	Ext.
<b>Emergency</b>	_____		
	Contact Name	Phone	

**PLEASE CHECK  A MAIN AREA OF INTEREST**

	<b>Job</b>	<b>Responsibilities</b>	<b>Any Where</b>
	Kitchen Help 4:30 PM – 8:00 PM	Make supper, cleanup of kitchen and dishes	
	Set Up Crew 3:30 PM – 6:00 PM	Set up beds, tables, signs and hall prior to 6:00 PM.	
	Servers 6:00 PM - 8:00 PM	Serve dinner to guests, set up/take down tables	
	Hospitality Crew 8:00 PM - 11:00 PM	Door people, visit our guests, help set up mattresses	
	Overnight Crew 11:00 PM – 6:00 AM	Keep site clean, check washrooms, watch exits	
	Breakfast Crew 6:00 AM – 8:30 AM	Wake guests, serve breakfast, clean of kitchen area	
	Cleanup – AM 7:00 AM – 8:30 AM	Clean hall, clean bedding, take blankets for cleaning	

**I AM INTERESTED IN VOLUNTEERING**

	<b>Shift</b>	
	EVERY WEEK	<b>Starting Date:</b> _____
	EVERY OTHER WEEK	
	ONCE PER MONTH	
	OTHER: <i>Please Specify</i>	

**PLEASE TURN PAGE OVER**

**TELL US A LITTLE ABOUT YOURSELF**

Home Church (if applicable)	
Occupation	
Community Affiliations	
Skills	
Hobbies and Special Interests	
Languages Besides English	
CPR	
First Aid Training	
Other	

Training that may be provided by Out of the Cold Steering Committee

	Health and Safety Training	
	Mental Health	
	Crisis Intervention Training (must have)	

**ALL VOLUNTEERS MUST  
READ AND SIGN BELOW**

*Our guests are to be treated with dignity and respect at all times. Consistent with that overriding emphasis is the importance of respecting the right to privacy and confidentiality of our guests. If we succeed in creating a warm and welcoming atmosphere it is possible that our guests will share with some of us their hurts and personal information. It is our commitment that any such information be kept confidential.*

**I will respect the dignity and privacy of our guests and will neither judge nor preach. I understand the need to treat any information obtained in strict confidentiality.**

Date	Signature
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**I am willing to undergo a police records check should that be deemed necessary for my volunteer position.**

Date	Signature
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***Personal References***

Name	Phone no.