

Scotiabank Hockey Day in Canada 2024

Volunteer Registration Victoria, BC January 15-21, 2024 Email completed form to: vhlsvolunteers@gmail.com

Personal Details			
Name:			
Address:			
Home Phone:			
Cellular Phone:			
Email:			
Date of Birth:			
Preferred pronouns			
Preferred contact method:		Cell	
(circle)	E-mail	Phone	Home Phone
Valid Driver's Licence:	No	Yes	If Yes #

Placement Information

Areas of interest (circle*)	
Lead supervisor for individual event	Greeter/general attendant
Indoor rink assistant	Dressing room attendant (prep and clean-up)
Ticket taker/coat check	General duties - indoor events
Information kiosk attendant	General duties - outdoor events
Traffic control/parking attendant	Outdoor rink maintenance (during event)
Errand runner	Outdoor rink construction and maintenance (pre-event)
Any role as assigned	
*not guaranteed	

Special skills or knowledge useful to the event

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Rink Construction	Golf	
Crowd Management	Silent auction experience	
First Aid	Willing to work outside	
able to lift 50 lbs	Smart Serve	
If other please state here.		

Availability

Monday January 15th	Set Up	Morning	Afternoon	
Tuesday January 16th Wednesday January 17th	Set Up Harbour Ice	Morning Morning	Afternoon Afternoon	Evening
	Golf Event	Morning	Afternoon	
	Opening Faceoff			Evening
Thursday January 18th	Harbour Ice	Morning	Afternoon	Evening
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Friday January 19th	Harbour Ice	Morning	Afternoon	Evening
Saturday January 20th	Harbour Ice Pancake Breal	Morning kfast	Afternoon 9:00 - 10:30	Evening
	Stanley Cup Photo's		10:00-16:00	
Sunday January 21st	Tear down	Morning	Afternoon	

Youth Volunteer Permission Slip

Applicants under the age of majority must have a parent/guardian fill out the following: I am aware of and support my child/legal dependent's decision to volunteer with the Scotiabank Hockey Day in Canada event January 15-21, 2024, in Victoria B.C.

Parent/Guardian Name:	Relationship to Applicant:
Telephone:	Email:
Parent/Guardian Signature:	
Acknowledgement of Applicant	

By checking this box I certify that the information on this form is correct and complete. I give permission to the SHDIC Local Organizing Committee to obtain, if required, a criminal record/vulnerable sector check and/or a driver's abstract. I understand that I will be advised in advance if a criminal record/vulnerable sector check and/or driver's abstract or other program specific checks are required.

Applicant's Signature:

Date: