

# Manitoba Soccer Association Inc.

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## Manitoba Soccer Association Volunteer Application Form

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

Gender / Self Identification: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Your Skills for the Position: \_\_\_\_\_

Employment Experience Relevant to the Position: \_\_\_\_\_

Previous Volunteer Experience Relevant to the Position: \_\_\_\_\_

Why do you want the position? \_\_\_\_\_

Do you have any physical limitations (i.e., lifting, etc.)? \_\_\_\_\_

Name and phone number of two references: \_\_\_\_\_

Do you have a Drivers' License? Y / N Are you CPR or AED certified? Y / N

Languages spoken: \_\_\_\_\_

What is your availability? \_\_\_\_\_

Are you willing to complete any training required for the position? Y / N

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

Emergency contact and number: \_\_\_\_\_

### Certification

I certified that the answers on this form are truthful, accurate, and complete to the best of my knowledge. I grant permission for the organization to contact any relevant persons to complete background checks and determine my suitability for the position.

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

Print Name: \_\_\_\_\_