

Membership Application – Vancouver Symphony Volunteers

First Name: _____ Last Name: _____

Mr. () Mrs. () Ms. () Dr. ()

Address: _____

_____ Postal Code _____

Tel: (H) _____ Cell: _____

Email: (H) _____

Tel: (Business) _____
(if appropriate to call)

Email: (Business) _____
(if appropriate to use)

Preferred method of contact: _____
(phone / email)

Please indicate areas of interest

EDUCATION - Assistance

- Kids Konzerts (Sunday matinees)
- Tiny Tots - Playhouse (Fridays AM)
- Elementary School Concerts (week day AM)
- Orpheum tour leader (Fridays as required)

Lottery Sales Assistance

- Lottery (ticket sales) and may include donations
 - Chan Centre at UBC
 - Surrey - Bell Centre
 - North Vancouver Centennial Theatre

- Lottery (selling tickets in malls)
 - North Shore Oakridge
 - Vancouver Richmond
 - Burnaby _____ Other (specify)

SERVICE – Concert Assistance

- Christmas Concerts (various venues)
- Assist with special needs patrons
- Retail – Gift Shop (Orpheum)
- Lottery/marketing tables - Orpheum
- Lottery/marketing tables – other venues
- Tea & Trumpets (Thursday matinees)

VOLUNTEER at Special Events

- Holland America Onboard Luncheon
- Symphony of Style

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For new volunteers we ask for a one year/season commitment – why are you are interested in joining the VSO volunteer program and how did you find out about it?

OFFICE ASSISTANCE - week days

Note: The VSO administration office is open **Monday to Friday from 9am to 5pm and is located at 500 – 843 Seymour Street (enter through the VSO School of Music and take the elevator to the 5th floor). To help in the office you must be available during these business hours.

- Data Entry/Computer Skills
- Stuffing Envelopes
- Filing / Sorting
- Good Handwriting
- Phoning (with a script)
- Serve on fundraising committees

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Getting to know you

Received Volunteer Package: _____ Attended orientation _____

Please indicate time preference: Day time Evenings Weekends only Varies

Like to be scheduled with: _____
(Name of volunteer in order to commute together)

Do you attend VSO concerts? _____ Subscribe to a series? _____ Do you donate to the VSO? _____

Is there any additional information, work experience, music background or volunteer work you would like to share in order to help us make your volunteer activities more enjoyable?

For New Volunteers please provide 2 references that include the contact info – telephone or email:

1) _____

2) _____

Signature of Applicant: _____

Date of Application: _____

Please return this Membership Application to:

THE VANCOUVER SYMPHONY

Mailing Address: 500 – 833 Seymour Street, Vancouver BC V6B 0G4

Location Address: 500 – 843 Seymour Street, Vancouver BC V6B 3L4 (enter through the VSO School of Music)

E: volrsvp@vancouversymphony.ca T: 604 684-9100 F: 604 684-9264