

VOLUNTEER STATUS FORM

BCF300



Legal Name of Society: _____

Date: _____ SQN/SSC # _____ Province: _____

APPLICANT NAME (PRINT)

APPLICANT SIGNATURE

As a volunteer, I declare that I will support the purposes of the Society namely to facilitate, support, promote and carry out the activities and programs of the Air Cadet League of Canada within British Columbia. I hereby consent to the collection, use and disclosure of my personal information in accordance with the Privacy Policy of the Society. I hereby acknowledge having received and having been given the opportunity to read and understand the Privacy Policy. Further, I agree to undergo the Screening & Registration process as required by the Air Cadet League of Canada.

VOLUNTEER

I hereby apply to be a **Volunteer** working under the direction of the Board of Directors of the Society. I will provide a current EPIC (Enhanced Police Information Check) or a Criminal Record Check from a local police detachment. (NOTE: VSS cannot be requested by Volunteers) I agree to undergo the Screening & Registration process as mandated by the Air Cadet League of Canada

BCPC OFFICE USE ONLY:

Document checklist: CRC/VSS _____ EPIC _____ JPG Photo rec'd _____

CARD # _____

Date of Registration: _____ Date of Expiry: _____

Card Sent: _____

Screening process verified and completed by:

Provincial Screening Coordinator

Date