



August 16-19 2018

Volunteer Application

Criminal Record Forms must be completed by RCMP and handed in at the time of application.

*There is no charge for this

Forms and volunteer letters can be picked up at the BCNE Office or online at bcne.ca/volunteer/

Name: _____ Last Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Phone: _____ Cell: _____

Age (Please check one): Under 19: _____ 19+: _____

Do you have serving it right? Yes: _____ No: _____

The BCNE requires volunteers in a number of different areas; please indicate three areas of interest:

____ Home Arts and Horticulture

____ Stetson Stomp (19+)

____ Set UP

____ Saloon (19+)

____ Tear Down

____ Livestock

____ Judging Entries

____ Concession Tables (tidy tables)

____ Sweeping Grounds

____ Emptying Garbage

Have you volunteered for the BCNE in the past? Yes: _____ No: _____

If so, which area(s)? _____

Are you available for Set-Up (week prior to opening day)? Yes: _____ No: _____

If so, when (date and time)? _____

Please list any special skills or interests you may have:

Signature of Applicant: _____ Date: _____

BCNE Representative: _____ Date: _____

***Upon request the BCNE will provide a letter indicating hours of volunteer service.**