

# SOAP Volunteer Application

## Symphony & Opera Academy of the Pacific



### *SOAP Volunteers: Great Music. Great People.*

Volunteers make many of our programs and special events possible. We look forward to your membership.  
Please fax this form to: 604.485.2055, OR mail it to: SOAP Volunteers, 7280 Kemano St, Powell River, BC V8A 1M2

### *PLEASE TELL US ABOUT YOURSELF*

NAME (Last, first) \_\_\_\_\_ GENDER  Male  Female

STREET ADDRESS \_\_\_\_\_

CITY, PROV \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

DAYTIME Phone \_\_\_\_\_ EVENING Phone \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

### *Do you speak a language other than English?*

Language: \_\_\_\_\_  Fluent  Good  Basic  Written

Language: \_\_\_\_\_  Fluent  Good  Basic  Written

Language: \_\_\_\_\_  Fluent  Good  Basic  Written

### *What are your volunteering interests — check all that apply:*

Stage hand  Ushering  Box Office  Transportation  Facilities

Clerical  Meal service  Housing/Billeting

Other (list): \_\_\_\_\_

We occasionally must billet visitors. If you are able to help out in an emergency please indicate number of Male: \_\_\_\_\_ Female: \_\_\_\_\_

If volunteering as a driver/transportation, please indicate class of valid license: \_\_\_\_\_

Type of vehicle you have available:

Automobile  Pickup Truck  Passenger Van  Cargo Van  Sport Utility Vehicle

### *Additional Comments:*

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

### *If you have any questions or comments, you can reach us by:*

PHONE 604 485 9633 FAX 604 485 2055 EMAIL info@soap-powellriver.ca

MAIL SOAP VOLUNTEERS, 7280 Kemano Street, Powell River, BC CANADA V8A 1M2