

## 2018 Doug Philpott Inner City Children's Tennis Fund Summer Volunteer Application Form

*Please complete all areas below. Please print clearly.*

Name: \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Reason for Application: \_\_\_\_\_

**Site(s):**

1. \_\_\_\_\_

2. \_\_\_\_\_

**References:**

1. \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

2. \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**Please indicate dates and times available to volunteer. Mark each applicable box with an 'X'**

Session times:	Weeks of Camp							
	July 3 - July 6**	July 7 - July 13	July 16 - July 20	July 23 - July 27	Jul 30 – Aug 3	Aug 7 - Aug 10**	Aug 13 - Aug 17	Aug 20- Aug 24*
9:00am - 10:00am								
10:00am - 11:00am								
11:00am - 12:00pm								
12:00pm - 1:00 pm								
Afternoon Session(s)*								

\* At applicable sites only, information to be made available.    \*\*There will be no camps on Monday, July 2 & Monday, August 6.

**Please complete this form and return it along with a police reference check to the Head Instructor at one of the Philpott Sites or email it to: [ceciley.parker@philpottchildrenstennis.ca](mailto:ceciley.parker@philpottchildrenstennis.ca)**

**\*N.B. All volunteers 16 and older must provide a clean police reference check.**

**Please apply for the reference check at:**

**[www.torontopolice.on.ca/recordsmanagement/clearance.php](http://www.torontopolice.on.ca/recordsmanagement/clearance.php)**

With the submission of this application, you agree to demonstrate the values of the Doug Philpott Tennis program. Your commitment to agreed upon volunteer times is expected and any changes will be clearly communicated with the Instructors at the appropriate site.

Thank you for choosing to volunteer with the Philpott Children's Tennis Program