



# VOLUNTEER INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Occupation & Employer \_\_\_\_\_

Days and times available \_\_\_\_\_

Means of transportation    own vehicle            public transit            other \_\_\_\_\_

## Education

- high school
  - college
  - bachelor's degree
  - masters
  - doctorate
  - other (specify) \_\_\_\_\_
- Areas of specialization \_\_\_\_\_

Areas of interest and special talents \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you find out about Ontario Forestry Association? (Please be specific.)

\_\_\_\_\_

What kind of work are you interested in doing with the OFA?

- shows and conferences
- school-based education
- working with landowners
- Smokey Bear
- special projects
- member services
- odd jobs

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For office use only

OFA signature \_\_\_\_\_ Program \_\_\_\_\_ Date \_\_\_\_\_

