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Volunteer Information Form

Date: _____

Name: _____

Address: _____ Postal Code: _____

Phone (home): _____ (cell): _____ (work): _____

All communication will be done by e-mail unless no e-mail is provided.

E-mail Address: _____

Are you a member at a golf club? Yes ___ No ___ If so, which one? _____

Gender: Male _____ Female _____ Birth date: ____/____/____ (Month/Day/Year)

Occupation/past work experience: _____

Have you volunteered elsewhere? _____

If so, where: _____

What are your volunteer interests? (Please note some positions require specialized training. i.e. rules & course rating; see volunteer page of website for more information.)

- | | |
|---|--------------------------------------|
| _____ Board of Directors | _____ Club Representation |
| _____ Committee work | _____ Course Rating |
| _____ Pace of Play Facilitator (Tournament) | _____ Rules Officiating (Tournament) |
| _____ Starting & Scoring (Tournament) | _____ Trade Shows |

Have you attended any training sessions with Golf Manitoba?

How did you hear about volunteer opportunities with Golf Manitoba?

Please return this form to Amy Coggan (amy@golfmb.ca) in the Golf Manitoba office at your earliest convenience.

