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## TURKUAZ TV VOLUNTEER MEMBER APPLICATION FORM

**Applicant's Full Name** \_\_\_\_\_

**Current Address** \_\_\_\_\_

\_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Email** \_\_\_\_\_

**Profession** \_\_\_\_\_

**University / Faculty / Year** \_\_\_\_\_

### **In Case of Emergency, Notify**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

### **Do you have a Driver's License?**

How do you think you can best contribute to our program, Turkuaz TV ? (camera, editing, writing news and announcements, anchor / reporter, graphics, floor assistant, public relations or website maintenance).

\_\_\_\_\_

\_\_\_\_\_

*We are always eager to add to our team of volunteers and look for supportive members that are reliable, professional and ready to learn.*

*Please take note that we ask for a minimum one year commitment from our volunteers. This application is for the "Candidate Membership". Upon approval by the board of directors, the Candidate Members may become Full Members after a three month trial period.*

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_