

# RE-REGISTRATION PACKAGE FOR RETURNING VOLUNTEERS

Forms are also available at:  
<http://www.victoriaspecialolympics.com/>

## RETURNING VOLUNTEERS

Volunteers with Victoria Special Olympics **MUST RE-REGISTER EVERY YEAR**. This is mandatory for insurance and other administrative reasons.

**Step 1:** Registration - complete the following **two** forms:

1. Victoria Registration Form (Special Olympics BC – Victoria; Volunteer Registration)
2. BC Special Olympics Volunteer Code of Conduct

**Step 2:** Send completed forms to the Volunteer Registrar at:

**Confidential Fax #:** 250-472-8171 (no cover sheet needed) **OR**

**Scan and email to:** [volunteerregistrar@gmail.com](mailto:volunteerregistrar@gmail.com) **OR**

**Mail to:** 355 Hector Road, RR#3  
Victoria BC  
V9E 2C3

# SPECIAL OLYMPICS BC - VICTORIA

## VOLUNTEER REGISTRATION - PROGRAM YEAR: 2011 - 12

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Sex: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ BC  
 Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_ Home Tel: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_ Work Tel: \_\_\_\_\_  
(list only if you may be contacted at work)  
 Please tick one - New Volunteer:  or Re-registration:

### Volunteer Interests - tick all that apply

Local Committee:  (Executive & Sub-committees) Special Events:  (e.g. walk-a-thon, car wash, etc.)  
 Youth Program - FUNdamentals:  (coach or assist with youth age 7-11)  
 Adult Program:  coach or assist in one or more of the following adult sports:

#### Fall

#### Spring

Alpine Skiing: <input type="checkbox"/>	Fig Skating: <input type="checkbox"/>	Floor Hockey: <input type="checkbox"/>	Swimming: <input type="checkbox"/>	Golf: <input type="checkbox"/>	Tball: <input type="checkbox"/>
Athletic Club: <input type="checkbox"/>	5 Pin Bowl: <input type="checkbox"/>	Nordic Skiing: <input type="checkbox"/>	Snowshoe: <input type="checkbox"/>	Soccer: <input type="checkbox"/>	Track/Field: <input type="checkbox"/>
Curling: <input type="checkbox"/>	10 Pin Bowl: <input type="checkbox"/>	Rhythmic Gym: <input type="checkbox"/>	Speed Skating: <input type="checkbox"/>	Softball: <input type="checkbox"/>	

### Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Telephone - Emerg Day #: \_\_\_\_\_ Emerg Night #: \_\_\_\_\_

### Medical Information

Medical card #: \_\_\_\_\_ Dr. Name: \_\_\_\_\_ Dr. Tel #: \_\_\_\_\_  
 Tetanus shot YR:  Glasses:  Contacts:  Dentures:  Hearing Aid:   
 Allergies :  List Allergies: \_\_\_\_\_ Asthma:  Heart Cond:   
 Diabetic:  Diabet Treatmnt: \_\_\_\_\_  
 Medication Name & Dose: \_\_\_\_\_ Dose Frequency: \_\_\_\_\_  
 Name2 &Dose: \_\_\_\_\_ Dose Frequency2: \_\_\_\_\_

### References - NEW VOLUNTEERS ONLY (references must not be related to you)

I, the undersigned volunteer, give Special Olympics BC - Victoria permission to contact the following references:

Ref Name 1: \_\_\_\_\_ Ref 1 Tel #: \_\_\_\_\_  
 Ref Name 2: \_\_\_\_\_ Ref 2 Tel #: \_\_\_\_\_

X \_\_\_\_\_  
 Signature of volunteer \_\_\_\_\_ Date \_\_\_\_\_

Office use only

Reg Date: \_\_\_\_\_ Prov Reg: \_\_\_\_\_ Ref check: \_\_\_\_\_ CRC: \_\_\_\_\_ C of C: \_\_\_\_\_ 1st Reg Date: \_\_\_\_\_



## BC Special Olympics Volunteer Code of Conduct

BC Special Olympics volunteers make it possible for athletes to benefit from quality sport training and challenging sport competition in a safe and positive environment. As a volunteer, you accomplish this by allowing the athletes the opportunity to interact with caring individuals, observe mature behaviour, and learn responsibility from your positive example. As a volunteer, you are expected to:

Fulfill the Responsibilities and Expectations of your Assignment:

- carry out all aspects of your assignment
- take the initiative to become aware of the responsibilities of your assigned position
- follow the policies and procedures of BC Special Olympics

Set an Example for the Athletes:

- refrain from drinking alcohol or using profanity in the presence of athletes
- avoid any behaviour which may be misunderstood or misinterpreted by athletes
- maintain your self-control at all times
- do not wear jeans at the regular training sessions or during any competitions
- treat everyone fairly within the context of their activity, regardless of gender, place of origin, colour, sexual orientation, religion, political belief, or economic status
- be helpful to and supportive of everyone associated with Special Olympics

Demonstrate Good Sportsmanship and Cooperation:

- consistently focus on the Athlete and the Special Olympics Mission
- respect the rules and support the decisions of all sports officials and committees
- follow proper protest protocols
- be respectful during ceremonies and help your athletes be the same
- praise the athletes for their efforts and encourage them to celebrate the success of others
- direct comments or criticism at the performance rather than the athlete
- support and encourage other volunteers and staff

I have read and understood the BC Special Olympics Volunteer Code of Conduct and agree to follow these guidelines throughout my volunteer assignment. I understand that any breach of this Code will result in disciplinary action.

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(Volunteer Name – Please Print)

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(Volunteer Signature)

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(Date)