

Volunteer Mission Statement

The Huntington Society of Canada is a national network of volunteers and professionals working together to find a meaningful treatment for Huntington disease and to improve quality of life for people with Huntington disease and their families.

Name: _____

Mailing Address: _____

City: _____

Postal Code: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Relationship to you _____

How did you hear about HSC? (friend, family, volunteer, staff/RCD, client, social media, other) _____

Volunteer areas of interest (Please check all opportunities that interest you)

- Administrative/Office Support– Supporting the National office in Waterloo. Working in person. An enthusiasm to help, a willingness to learn and some basic administrative skills considered an asset
- Tech Support – Supporting the National office in Waterloo. Working in person or remotely. Computer competency, graphic design, or social media skills are considered an asset
- Events/Fundraising - supporting and executing National events, awareness, and fundraising initiatives (e.g. #LightItUp4HD and Amaryllis) and/or assisting local Chapter Executive members in supporting and executing fundraising, education, and social initiatives
- Local Chapter Executive (leadership roles such as President, Treasurer, and Secretary) Chapter Executive lead the work of HSC in their local community, setting goals, plans, and budgets for fundraising, education, and social initiatives
- Youth Mentorship (youth providing support for youth across Canada who face the everyday challenges of growing up in a family affected by Huntington disease)
- Other: _____

Do you have any medical information for us to consider? Do you have any special needs for which you may require assistance? _____

If I am accepted as a volunteer with HSC, I am agreeing to:

- Attend HSC orientation sessions and complete orientation requirements respective to my volunteer role
- Sign and adhere to the Confidentiality Agreement, Code of Conduct, and Volunteer Agreement of HSC
- Abide by the policies and procedures of HSC
- Maintain a commitment as applicable to my volunteer role

This certifies that this application was completed by me and that all the entries and information are true and complete to the best of my knowledge.

Applicant Signature:

Date:

All information is kept strictly confidential.

The information you provide in this application will help us to place you in a volunteer position that best suits your skills, interests, and the needs of our organization. By completing this application, you agree to have your information shared with the appropriate staff person or Chapter volunteer(s) for your area of interest.