



**Richmond Rapids Swim Club  
Volunteer Application and Information Sheet**

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Any health conditions we should be aware of?  
\_\_\_\_\_  
\_\_\_\_\_

.....

All volunteers are required to bring their own bathing suit and potentially be in the water throughout the lesson. Please indicate what days you would prefer to volunteer:

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_

Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

Completed WSI \_\_\_\_\_ ( please provide proof of completion) \_\_\_\_\_

NCCP # \_\_\_\_\_

Completed Community Sport Coach Course: \_\_\_\_\_ (If so, date of completion) \_\_\_\_\_

Completed Safe Sport Training: \_\_\_\_\_ (If so, date of completion) \_\_\_\_\_

Making Ethical Decisions Course: \_\_\_\_\_ (If so, date of completion) \_\_\_\_\_

Relevant competitive swimming  
experience: \_\_\_\_\_

