Wing Kei Care Centre

Attachment#02-04

Group Volunteer Application Form 團體義工申請表

PLEASE COMPLETE THE APPLICATION AND RETURN TO VOLUNTEER COORDINATOR
請填遞申請表交回義工統籌 Contact No 聯络電話 (403)769-3745

Group Information 團體資料

Group Name 團體名稱 _____

Contact Name 聯絡人姓名
(English 英文)_____(Chinese 中文) _____ Position 職位 _____

Contact Person Mailing Address 聯絡人地址 Postal Code 郵遞區號
_____

Phone: Home 住宅 Work 工作 Cell 手提 Email 電郵
電話 : _____ _____ _____ _____

Preferred Method of Contact
□ Mail □ Email □ Home Phone □ Work Phone □ Cell Phone
郵遞 電郵 住宅電話 工作電話 手提電話

Have your group ever volunteered for Wing Kei?
曾否在榮基提供義工服務 □ No 沒有 □ Yes 有 If yes, when? 是/何時 _____

What type of service will your group provide? 將會提供何種服務?
_____

Is this a one-time service? 是否只是服務 - 次? □ Yes 是 □ No 否

When is the most suitable date/time for your group to provide this service? 最理想的服務日期/時間
Date 日期: **Time 時間:**
_____ _____

Which facility will your group like to provide service?
希望在那間院舍提供服務?
□ Wing Kei Care Centre 榮基護理中心 □ Wing Kei Greenview 榮基翠景中心

No. of volunteers 義工人數 _____

As the contact of the group I will provide information I may receive. The members will be volunteering during a group scheduled activity and not individually. If any member wishes to volunteer individually they will be required to complete the screening process including a current police information check.

本人為這個團體義工的聯絡人，並會將 雙方資料傳達。團體內所有義工只能以團體名義服務，任何人如希望以個人義工身份提供服務，必須重新申請並提交由警方發出的無犯罪記錄證明。

Date: _____ **Group Contact Signature:** _____

The personal information you have provided herein is collected in accordance with Section 32 of the Freedom of Information and Protection of Privacy Act, and will be used only to ascertain suitability for volunteer placement within Wing Kei. For additional information, please contact the Volunteer Coordinator at Wing Kei.

按照私隱法案資訊自由和保護私隱條例第 32 條，你所提供的個人資料將只用於確定是否適合在榮基當義工服務。有關其他詳情請向榮基義工服務部查詢。

Wing Kei's Website: www.wingkeicarecentre.org (check for site linkages)