

COALITION FOR NO WHALES IN CAPTIVITY

Box 461 - 1755 Robson Street, Vancouver, B.C. Canada V6G 3B7
Tel. (604) 736-9514 Fax (604) 264-0653 Email cfnwic@whaleprotection.org

<http://www.nowhalesincaptivity.org>

Volunteer Application Form

Thank you for offering to help our group end the cruel practice of keeping whales and dolphins in captivity for entertainment and profit. We are a grassroots registered non-profit organization fully run by volunteers. We lobby government and protest the dolphinarium industry, but we do not advocate violence. In order for us to know how you can best help, we need to know a little bit about you. Please fill out this form and let us know how you think you can help save the whales. Send back the form to us via e-mail attachment, fax or snail mail.

Name:

Address:

Email:

Telephone:

Age:

of Children: Ages of Children:

Languages spoken:

Special skills:

What do you do?

Education:

Employment:

Volunteer work:

Hobbies and sports:

How did you hear about our organization?

Do you know people connected to the animal advocacy movement that you can name as references? Yes No

If yes, please name.

COALITION FOR NO WHALES IN CAPTIVITY - Volunteer Application Form

Do you or have you ever volunteered for other non-profit groups? Yes No

If yes, which ones and what did you do?

Do you or have you ever worked or volunteered at the Vancouver Aquarium? Yes No

Are you or have you ever been a member of the Vancouver Aquarium? Yes No

Do you have any contact with staff or volunteers of the Vancouver Aquarium? Yes No

Why do you want to help end whale captivity?

How do you think you can help? Are you able to...? (Check all that apply)

- | | | | |
|---|--|--|---|
| attend rallies and protests <input type="checkbox"/> | set up display tables <input type="checkbox"/> | distribute leaflets and posters <input type="checkbox"/> | help with our website <input type="checkbox"/> |
| participate in strategy meetings <input type="checkbox"/> | write protest letters <input type="checkbox"/> | design/publish information <input type="checkbox"/> | recruit new volunteers <input type="checkbox"/> |
| speaking in public <input type="checkbox"/> | donate money <input type="checkbox"/> | | |

Is there anything else you would like us to know about you?

Signature _____

Date _____