



1029 Commercial Dr, Vancouver, BC V5L 3X1

tel: **(604) 215-9970** email: **info@miscellanyfinds.ca**

hours of operation: **Mon to Sat: 10am – 6pm, Sun: 12pm – 5pm**

**miscellanyfinds.ca**

## Miscellany Finds Volunteer Contract Form

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

Phone#: \_\_\_\_\_

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

I, \_\_\_\_\_, agree to

commit to the \_\_\_\_\_ shift at Miscellany Finds for a minimum of three months starting

\_\_\_\_\_ and ending \_\_\_\_\_

Should I wish to renew I may choose to select an open ended contract or extend my commitment for another three months.

I understand that volunteering at Miscellany Finds will present opportunities to work directly with women who are transitioning from mental health issues, sex trade work, domestic violence and isolation. I recognize that I will not be responsible for providing direct support to women who access WWW programming, however I am expected to deliver important information and resources to women who inquire. My key role is to deliver the Miscellany brand and participate in the everyday processes of the retail establishment including:  
Cash duties, customer service, merchandising and display.

Signed this date. \_\_\_\_\_

Volunteer \_\_\_\_\_



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## Miscellany Finds Parental Consent Form

In order for your child to become a volunteer with us, we need your consent and involvement in helping them have a productive experience. Please read and sign this parental consent form if you would like Miscellany Finds to continue the process of considering your child as a volunteer.

Note: This Parental Consent Form must be filled out for all volunteers under age 16.  
Children under the age of 14 may not volunteer at Miscellany Finds.

Name of youth volunteer: (print clearly)

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I understand that my child (named above) wishes to be considered for volunteer work and I hereby give my permission for him/her/them to serve in that capacity, if accepted by Miscellany Finds.

I understand that he/she/they will be provided with any training necessary for the safe and responsible performance of his/her duties and that he/she will be expected to meet all the requirements of the position, including scheduled regular attendance and adherence to miscellany finds policies and procedures.

I understand that he/she will not receive monetary compensation for the services contributed.

Parent/Guardian Name (print clearly) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Relationship to volunteer: \_\_\_\_\_

Parent Phone: \_\_\_\_\_

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

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

Volunteer Signature: \_\_\_\_\_

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



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## Confidentiality Agreement

This Confidentiality Agreement was made and entered into on \_\_\_\_\_

The contract is between Women Working with Women, the Employer, who currently runs the social enterprise establishment, Miscellanyfinds, at 1029 Commercial Dr. and the Volunteer Employee.

All information relating to any personal details of colleagues or customers, W4 business and program development will be kept in confidence and will not be shared with any other parties.

1. The Employee also agrees not to use any unauthorized copies of any documentation of the volunteers working and training in the Training program.

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Signature of volunteer employee

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Signature of employer

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Printed Name of Volunteer Employee

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Printed Name of Employer

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Date signed

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Date signed