



LANGLEY MEMORIAL
HOSPITAL AUXILIARY

Penny Pincher Thrift Store

Volunteer Inquiry Form

NAME _____

PHONE: _____ EMAIL: _____

EMERGENCY CONTACT NAME AND NUMBER: _____

Days available to work:

Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___

Skills/Areas of interest that may be used in store: (repairing, Cashiering,
Management) _____

Present or Previous Volunteer or work experience:

Languages: Spoken _____ Written _____

Are there any limitations that may affect your volunteer assignment? Yes ___ No ___

If yes, indicate limitations _____

References: (Other than family members, minimum of two (2) required)

1. Name: _____

Address: _____

Phone Number: _____ Relationship: _____

2. Name: _____

Address: _____

Phone Number: _____ Relationship: _____

Please note the following

- There is a yearly membership fee of Ten dollars and a Five Dollar uniform fee when joining the LMH Auxiliary
- A **Criminal Record Check** and reference checks are condition of volunteering at Penny Pincher – no charge – we will give you information on how to apply
- You will be asked to sign a confidentiality agreement

Please email to managerpennypincher@gmail.com or drop off in the store at 20550 Fraser Highway Langley, B.C.