

Volunteer Application Form



L.O.P.A.C.

Lionaire Oils & Product Agricultural
Co -Operative

**Once completed this Application become private and
confidential and will not be publicly disclosed.**

Volunteer Application Form



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1. Your Personal Information
 2. Emergency Contact
 3. Availability
 4. Skills & Interests
 5. Volunteer Experience
 6. L.O.P.A.C. Mission Statement
 7. General Questions
 8. Education
 9. Previous Work Experience
 10. Accommodation
 11. Your planned commitment to L.O.P.A.C.
 12. Languages Spoken
 13. Your Agreement with L.O.P.A.C.
 14. Volunteer Image and Media Release Form
- our planned commitment to L.O.P.A.C.



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Thank-you for your interest in L.O.P.A.C. and your application.

Today's Date

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DAY

MONTH

YEAR

1. Your Personal Information

LAST NAME	FIRST NAME	MIDDLE
FULL HOME ADDRESS		
GOVERNMENT ID #	EMAIL	TELEPHONE

2. Emergency Contact

LAST NAME	FIRST NAME	MIDDLE
	EMAIL	TELEPHONE

3. Availability

☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday	☐ Saturday	☐ Sunday
Hours/week?		Hours/month?				

4. Skills & Interests

Tell us about your skills and interests, including activities other than what you would be doing for L.O.P.A.C.



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5. Volunteer Experience

Do you have any other volunteer experience? If yes, please describe.

6. L.O.P.A.C. Mission Statement

Review our Mission Statement.

“L.O.P.A.C. is proud to be an inclusive, equal-opportunity farmers’ cooperative, together we will be committed to fostering a welcoming and supportive environment for all. Our co-op celebrates diversity and stands against discrimination of any kind, ensuring that everyone—regardless of background, race, gender, or ability—has an equal voice and opportunity to thrive. Together, we grow stronger, united by our shared passion for sustainable agriculture and community success.”

Please acknowledge, with your signature, that you have read and agree with our Mission Statement.

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SIGNATURE

7. General Questions

Tick if yes, leave blank if no.

Questions:	YES
Do you have access to a vehicle?	☐
Do you have a First Aid Certificate?	☐
Do you have workboots?	☐
Are you working full-time?	☐
Will you be available for weekly update meetings online?	☐
Do you have an up to date Good Conduct Certificate?	☐
	☐

**Please attach your Good
Conduct Certificate with the
application.**





8. Education

Tell us about your Education.

SCHOOL NAME	HIGHEST YEAR COMPLETED	DEGREE

9. Previous Work Experience

Tell us about your previous work experience in your field.

10. Accommodation

Do you have any special needs we should be aware of?

Tick if No. ☐





11. Your planned commitment to L.O.P.A.C.

Please detail what you expect you can offer, what work you are willing to do and include your ideas about how your volunteer activities will add value to our program.

12. Languages Spoken

What other languages do you speak?



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13. Your Agreement with L.O.P.A.C.

This Volunteer Agreement ("Agreement") is entered into on this [Date] by and between:

Lionaire Oil & Products Agricultural Co-Operative [L.O.P.A.C.]
and

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1. Purpose of Agreement

The purpose of this agreement is to set out the terms and conditions under which you will volunteer with L.O.P.A.C.. This Agreement outlines the responsibilities of both parties in order to ensure a successful and positive volunteering experience.

2. Role and Responsibilities

The volunteer agrees to perform the following duties and tasks during the period of volunteering:

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The volunteer agrees to comply with all relevant policies, procedures, and regulations of the organization while volunteering.

3. Term of Volunteering

The volunteer's services will continue until either parties wish to end the relationship.

4. Work Schedule

The volunteer agrees to provide 12 hours per month.

5. Training and Supervision

L.O.P.A.C. will provide necessary training and supervision as required for the volunteer role. The volunteer agrees to attend all relevant training sessions and participate in supervision meetings, as necessary.

6. Volunteer Benefits

As a volunteer, you will not receive monetary compensation for your services. L.O.P.A.C. will make every effort to provide equipment, services and tools needed to help you with your volunteer service.

7. Confidentiality

The volunteer agrees to respect the confidentiality of all information related to the organization, its clients, staff, and other volunteers, which is obtained during the course of volunteering.

8. Termination of Agreement

Either party may terminate this agreement with written notice to the other party.

10. Non-Discrimination

L.O.P.A.C. is committed to providing a volunteer environment that is free from discrimination based on race, color, sex, age, disability, religion, or any other characteristic protected by law.

11. Acknowledgment

By signing this agreement, the volunteer acknowledges that they have read, understood, and agree to the terms outlined above.

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Volunteer Signature

L.O.P.A.C. Director Signatures



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14. Volunteer Image and Media Release Form

Purpose:

I grant L.O.P.A.C., its representatives, and agents the right to use photographs, videos, or other media featuring my image, likeness, voice, and/or name for promotional, marketing, or educational purposes.

1. Scope of Use:

I understand that my image may be used in:

- Social media posts (e.g., Facebook, Instagram, LinkedIn, Twitter)
- Company websites
- Printed and digital marketing materials
- Internal presentations or training materials
- Media releases or external publications

2. Rights Granted:

By signing this form, I authorize L.O.P.A.C. to:

- Edit, alter, copy, or publish my image or media as needed.
- Distribute the media without notifying me beforehand.

3. Duration of Use:

I understand that this authorization is perpetual.

4. Compensation:

I confirm that I will not receive any financial compensation for the use of my image or media in the above contexts.

Acknowledgment:

I understand and agree to the terms of this release. I confirm that I am of legal age and have the right to grant this permission.

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Volunteer Signature

L.O.P.A.C. Director Signatures

