



Volunteer Application Form

Please check the box beside each committee you would like to volunteer with:

☐

[Heritage Advisory Committee \(HAC\)](#)

[HAC Terms of Reference](#)

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[Public Safety Advisory Committee \(PSAC\)](#)

[PSAC Terms of Reference](#)

You may attach a resume or other information to support your application. Committee members are volunteers. This position requires approximately two hours per month, or as needed, for a one-year term. Meetings take place during regular business hours.

Name: _____

Phone number: (Home/Cell): _____

Address: _____

(Business): _____

E-mail: _____

Postal Code: _____

How long have you lived in Chilliwack? _____

Occupation: _____

Employer: _____

Tell us about your work, education, or lived experience. How does it relate to the committee you want to join?
(Information about each committee can be found in their Terms of Reference, linked above or on our website:
chilliwack.com/committees)

Tell us about your volunteer work or community involvement. How does it relate to the committee you want to join?

What are your areas of interest? Why?

The personal information in this application is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*.

If you have questions about how we use your information, please contact:

Legislative Services
604.793.2986

Please check the boxes below if the statements are accurate:

- ☐ I am not an employee or board member of an organization receiving funding from the City of Chilliwack
- ☐ I will be available for meetings monthly, or as required, and for a 15 minute interview.

(Signature of Applicant)

(Date)

Please return this form to:

City of Chilliwack
Attention: Administration Department
8550 Young Road
Chilliwack, BC V2P 8A4
or by email to caoadmin@chilliwack.com

Deadline: November 28, 2025