



SOCIETY

MEMBER / VOLUNTEER / NON MEMBER VOLUNTEER

VERIFICATION FORM

SOCIETY MEMBERSHIP (All applicants must complete and include this page in screening package)

Sqn #: _____ Date: _____ Province: _____

I declare that I will support the purposes of the Society, namely to facilitate, support, promote and carry out the activities and programs of the Air Cadet League of Canada with British Columbia. I hereby consent to the collection, use and disclosure of my personal information in accordance with the Privacy Policy of the society. I hereby acknowledge having received and having been given the opportunity to read and understand the Privacy Policy. Further, I agree to undergo the Screening Process as required by the Air Cadet League of Canada.

APPLICANT NAME (PRINT)

APPLICANT SIGNATURE

Legal name of Society: _____

I hereby apply to be a ***Member*** of the Society understanding and acknowledging that I will be a Member with voting status. I will not be active in the day to day business of the Society however I agree to undergo the screening process as required by the Air Cadet League of Canada.

I hereby apply to be a ***Member Volunteer*** of the Society understanding that I will be an active member with voting status with the Society, actively participating in the day to day business of the Society. I agree to undergo the screening process as required by the Air Cadet League of Canada, understanding this requirement when working with or around the youth of the organization.

NON-MEMBER VOLUNTEER

I hereby apply to be a ***NON-MEMBER Volunteer*** understanding that I will be working under the supervision of the Squadron Commanding officer. (No Vote – Not a member of the Society).

I acknowledge that I will support the purposes of the Air Cadet League of Canada within British Columbia. I hereby consent to the collection, use and disclosure of my personnel information in accordance with the Privacy Policy. I hereby acknowledge having received and having been given the opportunity to read and understand the Privacy Policy, as a CI or *Non member* Volunteer I agree to undergo the Screening process as required by the Air Cadet League of Canada.

BCPC OFFICE USE ONLY

Date Rec'd _____

CARD REG # _____

Date of Screening: _____

Date of Renewal _____

Date of Expiry _____

Date Card Sent: _____

Document Verification: CRC VSS PHOTO ID
(Check Documents as verified – DL photo, Passport or Government photo accepted)

Screening process verified and completed by: _____

Date _____

Signature of Provincial Screening Coordinator