

Friend of the Treasure Chest

Application

Name _____ Home phone _____

Street _____ Work phone _____

Box # _____ Cell phone _____

Ignace _____

ON _____ POT 1T0 _____

email _____

Treasure Chest Member References (please name two active members)

1. _____

2. _____

I will abide by the operations procedures of the Treasure Chest when volunteering for the group.

Signature _____ Date _____
