



**Chilliwack  
Learning  
Community  
Society**

**Chilliwack Learning Community Society  
OWL Registration Form**

Date:

Name:

Phone Number:

My email Address:

I do not have an email address: \_\_\_\_\_

Mailing Address:

I have volunteered in a literacy program in previous years:

- No
- Yes: If so, where, when, what did you do, and for how long?

My occupation (current or previous), volunteer experiences, hobbies, interests and passions are:

The skills and qualities that I bring are:

I am interested in the following:

- Helping support families with young children
- Helping programs who reach out to youth
- Helping adults who feel isolated or in need of literacy support
- Helping English as a second language learners
- Helping to integrate literacy skills training into the workplace
- I don't know yet

I am interested in

- One on one tutoring
- Conversation circles
- Assisting in a classroom
- Being available as a literacy resource person in a community program
- I don't know yet

I am available to meet with a learner (as many as apply) M T W Th F S

Preferred Times (s)

Other comments: