



# Volunteer Application

## Your Contact Details:

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Drivers Licence No \_\_\_\_\_ Vehicle Registration \_\_\_\_\_

**Prefer:** Mobile [  ] Email [  ] Home Phone [  ]

## Emergency Contact Details:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Working with Children Check [  ] Yes [  ] No [  ] Sighted Card No: \_\_\_\_\_

\*All roles will require Working with Children Check. It is free for volunteers.

**Ambulance Subscription:** Yes [  ] No [  ]

\*In the case of an emergency an ambulance will be contacted and associated expenses the responsibility of individual staff / volunteers. Everyone is encouraged to have an ambulance subscription.

**Medical Conditions:** Do you have any medical conditions or disability that could impact on your ability to undertake certain tasks. If so, please detail:

\_\_\_\_\_

**Note:** All medical and personal information will be treated as confidential.

## Permission To Use Photographs & Video:

I \_\_\_\_\_, AGREE for ..... to take, use, & distribute photographs, in order to promote volunteering or the organisation. I allow such use.

**Signed:** \_\_\_\_\_

**Type of Work Preferred**

Select your preferences and then tick the appropriate box below.

<input type="checkbox"/>	Administration/ Committee
<input type="checkbox"/>	Maintenance
<input type="checkbox"/>	Grounds
<input type="checkbox"/>	Canteen
<input type="checkbox"/>	Coaching
<input type="checkbox"/>	Referring
<input type="checkbox"/>	Carnival Days
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

What days and times would you like to volunteer?

	MON	TUES	WEDS	THURS	FRI	SAT	SUN
AM							
PM							

Please highlight the skills, knowledge and or experience you bring to this role:

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**Referee Contact Details:**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Office Use Only**

Date Received:            /    /

Child Safety Policy provided

Volunteer Agreement returned

Entered into WWCC Database

Blue Card Fact Sheet

Volunteering Rights Facts Sheet

**Staff**

Induction complete