Appendix G - Volunteer Application Form template

Insert your organisation name / logo

Volunteer Application Form

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If you would like to	become a volunteer please	e fill in this form and post o	r email it to:				
Name							
Address:							
Email:							
For more informati	on or help to fill in the form	n phone <mark>xxxx</mark> on <mark>xxxx</mark> or ema	ail <mark>xxxx</mark>				
Your name							
Your address							
Post code							
Your email							
Your phone	Daytime:	Evening:	Mobile:				
Your occupation	(If applicable)						
Which tasks would	you like to help with? (tick a	Ill that apply) Event					
 Front of house ■ Marketing and sales 							
 Supporting and hosting artists Back stage 							
 Planning and adr 	ninistration	Food and drink pre	eparation				
What is your past w	vork experience and qualific	cations that are relevant to	volunteering with us?				
Tell us about the skills you have and may use as a volunteer:							

				T						
Do you have an NZ driver's licence? Yes / No			Do you have your own transport? Yes / No							
Type of licence:				Are you willing to use your own transport as part of your role? Yes / No						
What time are	e you able to gi	ve to our orgar	isation :	? (Please d	circle)					
Weekly / Mont	thly									
One-off-event exhibitions / projects / productions										
Which times are you able to give our organisation? (Please circle)										
Monday	Tuesday	Wednesday	Thurso	lay	Friday	Saturday	Sunday			
Morning / Afternoon	Morning / Afternoon	Morning / Afternoon	Morning / Afternoon		Morning / Afternoon	Morning / Afternoon	Morning / Afternoon			
Do you have any modical conditions that could affect your work or safety as a valunteer?										
Do you have any medical conditions that could affect your work or safety as a volunteer? Yes / No										
If yes, please give details:										
How did you find out about volunteering with us?										
I consent to you contacting these people to do a reference check:										
Referee One:			Pol	ationchi	n:					
					•					
Phone: Email:										
			R≙l	ationshi	'n٠					
					-					
The information I have given on this form is true and correct. I agree that [Organisation name] can keep electronic and hard copy records of my information.										
Signed:	 Volunteer				Date:					