

## **VOLUNTEER APPLICATION FORM**

Name				
Address				
Home Phone				
Cell Phone				
Emergency contact name & phone				
Email Address				
Date of Birth			Gender M / F	
What relevant experiences and skills do you have?	(qualifications, work experience,	skills, interests, h	obbies, other volunteer experie	nce)
Provide the contact details of two people (who are not related to you	Name	Name		
and are over 18) who can be contacted for references.	Address	Addr	Address	
	Phone		Phone	
	Relationship to you	Relat	onship to you	
Do you have any health issues we should be aware of? Or dietary requirements?		·		
Do you have a current First Aid Certificate?	Yes / No	Expiry date		
Do you have a current Full Driver's license?	Yes / No			
I, as a Recreate volunteer have read and understood the Volunteer Role Description and agree to adhere to its values and requirements. I confirm I have parental consent where applicable to attend a recreate programme as a volunteer.				
Signed				
Date				





