

VOLUNTEER REGISTRATION FORM



Office Use Only:

Date entered
onto V-Base:

Volunteer
I.D:

Interviewed
by and date

Volunteer Details

All the information on this form enables us to match you to a suitable, enjoyable volunteer role. Some of the following information is requested for statistical purposes only and is used to ensure that we are making volunteering available to everyone in our community. Thank you for taking the time to complete this form.

Title:

First Name:

Surname:

Salutation: (e.g. Vicky for Victoria)

Address:

(Town)

(County)

(Postcode)

**Do you have a preferred
location for your Voluntary
Role?**

Telephone Contact Numbers:

(Daytime)

(Evening)

(Mobile)

E-mail Address:

**How did you hear about this
Volunteer Centre?**

Future Contact: I agree to be contacted with volunteering newsletters, mail outs from the volunteer centre or promotional material regarding selected volunteering opportunities.

(Please tick the relevant boxes)

Telephone

Mail

E-mail

Area of Interest		Type of Activity	
Tick any that interest you		Tick all that match your preferences, skills or experience	
Animals	<input type="checkbox"/>	Administration	<input type="checkbox"/>
Art and Culture	<input type="checkbox"/>	Advice Work, Information and Support	<input type="checkbox"/>
Children	<input type="checkbox"/>	Architecture and Building Work	<input type="checkbox"/>
Disability	<input type="checkbox"/>	Art	<input type="checkbox"/>
Disaster Relief	<input type="checkbox"/>	Befriending and Buddying	<input type="checkbox"/>
Domestic Violence	<input type="checkbox"/>	Business Management and Research	<input type="checkbox"/>
Drugs and Addictions	<input type="checkbox"/>	Campaigning and Lobbying	<input type="checkbox"/>
Education and Literacy	<input type="checkbox"/>	Caring	<input type="checkbox"/>
Elderly	<input type="checkbox"/>	Catering	<input type="checkbox"/>
Emergency Services	<input type="checkbox"/>	Community Work	<input type="checkbox"/>
Employment	<input type="checkbox"/>	Computers, Technology and Website Design	<input type="checkbox"/>
Environment	<input type="checkbox"/>	Counselling	<input type="checkbox"/>
Families	<input type="checkbox"/>	Driving	<input type="checkbox"/>
Gay, Lesbian, Bi and Transsexual	<input type="checkbox"/>	Employee and Group Volunteering	<input type="checkbox"/>
Health, Hospital and Hospices	<input type="checkbox"/>	Entertainment	<input type="checkbox"/>
Heritage	<input type="checkbox"/>	Finance Work	<input type="checkbox"/>
Homeless and Housing	<input type="checkbox"/>	First Aid	<input type="checkbox"/>
Human and Civil Rights	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
International Aid	<input type="checkbox"/>	Gardening	<input type="checkbox"/>
Legal Aid and Justice	<input type="checkbox"/>	General and Helping	<input type="checkbox"/>
Mental Health	<input type="checkbox"/>	Hostel Work	<input type="checkbox"/>
Mentoring	<input type="checkbox"/>	Languages	<input type="checkbox"/>
Millennium Volunteers	<input type="checkbox"/>	Legal Work	<input type="checkbox"/>
Museums	<input type="checkbox"/>	Local Events	<input type="checkbox"/>
Music	<input type="checkbox"/>	Marketing, PR and Media	<input type="checkbox"/>
Politics	<input type="checkbox"/>	Mentoring	<input type="checkbox"/>
Prisoners and Ex-Offenders	<input type="checkbox"/>	Music	<input type="checkbox"/>
Race, Ethnicity and refugees	<input type="checkbox"/>	National and International Events	<input type="checkbox"/>
Religion	<input type="checkbox"/>	Officials	<input type="checkbox"/>
Sport and Outdoor Activities	<input type="checkbox"/>	Practical Work and DIY	<input type="checkbox"/>
Women's Groups	<input type="checkbox"/>	Retail and Charity Shops	<input type="checkbox"/>
Youth	<input type="checkbox"/>	Sports Development	<input type="checkbox"/>
		Teaching, Training and Coaching	<input type="checkbox"/>
		Trusteeship and Committee Work	<input type="checkbox"/>
		Under 16 Volunteering	<input type="checkbox"/>
		Youth Work	<input type="checkbox"/>

Please enter any special skills, studies or interests, past voluntary experience, hobbies and work experience:

Please tick when you could be available to Volunteer:							
	a.m.	p.m.	eve		a.m.	p.m.	eve
Monday				Friday			
Tuesday				Saturday			
Wednesday				Sunday			
Thursday							
Any other Comments on Specific Times: (E.g. once a fortnight, month, ad hoc, or short term)							
Personal Details:							
Date of Birth:							
Gender: (Please tick)		Male		Female			
Age Range: (Please tick)							
Under 15		15-18		19-25		26-29	
30-34		35-39		40-44		45-49	
50-54		55-59		60-64		65+	
What is your Current Employment Status? (Please tick)							
Employed		Retired		Unemployed			
Employed part time		Self Employed		Non Employed			
House person		Student		Unable to Work			
Ethnicity: To which ethnic group do you belong? (Please tick)							
Bangladeshi	<input type="checkbox"/>	Black African	<input type="checkbox"/>	Black Caribbean	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Other Asian background	<input type="checkbox"/>	Other Black background	<input type="checkbox"/>	Other mixed background	<input type="checkbox"/>
Other White background	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>
White & Black Caribbean	<input type="checkbox"/>	White British	<input type="checkbox"/>	White British English	<input type="checkbox"/>	White British Scottish	<input type="checkbox"/>
White British Welsh	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	Any other background	<input type="checkbox"/>		
Disabilities: Are you disabled?(Please tick)							
Yes		No					
Please tick any of these that may apply:							
Visual /Sensory Impairment				Learning Difficulties/Disabilities			
Mental Health				Physical			
Ex Offender							
We would encourage you to discuss any support you may need if any of the above apply							

Usual means of Transport: (Please tick)	
Own Motor Vehicle	Public Transport

Signature:	
Date:	
Checked and signed (office use only)	

This information will be held on a computer which complies with the Data Protection Act 1984. Any information marked above as confidential will not be released to any person without your prior agreement.

Thank you for taking the time to complete this form and for offering your time to volunteer.

Please return form to:
 Jenny Jones, Runnymede Association of Voluntary Service, Units 12-13,
 The Sainsbury Centre, Chertsey, Surrey, KT16 9AG
 or email: jenny.jones@ravs.info

This form can be made available in large print on request
 call: 01932 571122 for details