



VOLUNTEERS APPLICATION FORM

Surname _____ Title _____

Forename (s) _____

Full Address _____

_____ Post Code _____

Telephone Number _____

E-Mail address _____

Please Tick Areas of Interest

- | | | | |
|------------------------------|--------------------------|---------------------------|--------------------------|
| ROOM STEWARDING IN THE HOUSE | <input type="checkbox"/> | GRANARY GALLERY ASSISTANT | <input type="checkbox"/> |
| CONSERVATION | <input type="checkbox"/> | RESEARCH / ARCHIVE | <input type="checkbox"/> |
| GARDENING | <input type="checkbox"/> | PARK RANGER | <input type="checkbox"/> |
| EDUCATION DAY LEADER | <input type="checkbox"/> | EDUCATION ASSISTANT | <input type="checkbox"/> |

Please provide the days and times you would be available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Are you looking to volunteer:

All year round	<input type="checkbox"/>
Term time only	<input type="checkbox"/>
During school holidays only	<input type="checkbox"/>

Please indicate your current status:

Employed	Unemployed	Retired	Full-time student	Part-time student



NEXT OF KIN'S DETAILS:

Contact in first instance:

Title (Mr./Mrs./Ms./Miss/Other):

.....

Surname:

Forename(s):

Home Details:

Address:

.....

.....

.....

Telephone No(s):

Home:

Mobile:

Work Details:

Company:

Address:

.....

.....

.....

Work Telephone No:

Contact in second instance:

Title (Mr./Mrs./Ms./Miss/Other):

Surname:

Forename(s):

Home Details:

Address:

.....

.....

.....

Telephone No(s):

Home:

Mobile:

Work Details:

Company:

Address:

.....

.....

.....

Work Telephone No:

.....

I hereby confirm that the information given on this form is correct as at today's date.

Signed:.....

Dated:.....