#

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| Town Postcode |  |
| Home Phone |  |
| Mobile Phone |  |
| E-Mail Address |  |

## Availability

During which hours might you be available to volunteer?

|  |  |
| --- | --- |
| Weekday mornings \_\_\_ | Weekend mornings \_\_\_ |
| Weekday afternoons \_\_\_ | Weekend afternoons \_\_\_ |
| Weekday evenings \_\_\_ | Weekend evenings \_\_\_ |
| Weekly \_\_\_ | Fortnightly \_\_ |
| Available as reserve for busy events \_\_\_ |  |

## Interests

Tell us in which areas you are interested in volunteering.

|  |  |
| --- | --- |
| Auditorium/Film Stewarding  |  Box Office  |
| Bar Steward  | Café help |
| Fundraising/ Marketing  | Technical work  |
| Administration  | Maintenance |

**Special Skills or Qualifications**

Summarize any relevant special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports eg computer, financial, HR, legal

|  |
| --- |
|  |

## Previous Volunteer Experience

Sumarise your previous volunteer experience – leave blank if none.

|  |
| --- |
|  |

## Person to Notify in Case of Emergency

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| Town Postcode |  |
| Home Phone |  |
| Mobile Phone |  |
| E-Mail Address |  |

## Please give details of a person whom we may contact for a reference

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| Town Postcode |  |
| Home Phone |  |
| Mobile Phone |  |
| E-Mail Address |  |

## Our Policy

It is the policy of The Flavel to provide equal opportunities without regard to race, colour, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete.

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |