

Volunteer Application / Registration Form

Personal details:			
Name:	Phone:	Mobile:	
Address:			
Email:			
Emergency Contact:			
Name:	Phone	:	
Skills and experience:			
Please give brief details of your sk your employment background, pro	•	-	ole. This can include
Background and interests:			
Please give brief details. This can	include hobbies, interes	ts:	
Any previous voluntary experience	e you would like to tell u	s about (if not mentione	d above)



Please tick the kind of voluntary work you are interested in:								
	Front of House		Social Media		Guided Walks		Research/Archives	
	Fundraising Events		Trust Admin		Groundwork on Site		Talks	
Time a	availability:							
When	can you voluntee	er: tick t	the times below t	hat ap	ply:			
	10am – 1pm		1pm – 4pm		Weekdays			
	10am – 1pm		1pm – 4pm		Weekends			
Any other information you'd like to give us about your availability References / additional information How did you find out about our volunteering opportunities?								
	Our website		Facebook		Advert		From a current volunteer	
	From a visitor		Local Volunteer Centre		Posters	Other:		
Please give us details for two people we may contact for references:								
Name	/ Address							
	Phone number							
Name	/ Address							
	Phone number							

Data Protection Act 1998

FIPT will only use the information provided by you to assess your suitability to volunteer with us. We reserve the right to gather information from other sources too, for example, by using your references. We will not contact other parties without asking you first. In addition, we request information on a separate sheet which will be used for equal opportunities monitoring purposes. This information is always kept separate from personal details and remains confidential. It enables us to check whether we are attracting volunteers from diverse backgrounds and to make changes if we are not.

Please return completed form to: Foxton Canal Museum, Middle Lock, Gumley Road, Foxton, LE16 7RA