

Volunteer Application Form



1. Name:

2. Address:

3. Postcode:

4. Tel No: (home) (mobile)

5. Email:

6. Name and telephone number for Emergency Contact (eg: next of kin):

7. Do you consider yourself to be a disabled person?
YES/NO (delete as appropriate)
If YES please give a brief description of your impairment or medical condition:

8. Will you require any additional support, assistance or equipment to volunteer? (please specify)

9. When are available volunteer? (if possible please provide specific times when you are available).

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Availability							

10. How often would like to volunteer?

2 x a week 1 x a week Bi-weekly Monthly

Volunteer Application Form



11. In what role/s would like to volunteer? (please circle)

Administration Reception & Enquiries Exhibition Host Youth Worker

12. What is your reason for applying to become a volunteer at Pavilion on the Park?

13. Please state any previous voluntary work or experience with dates:

Please provide us with two referees. They should be people other than a family member, who have known you for a minimum of 2 years, either in a personal, voluntary, work or educational capacity.
(name/address/telephone/email/relationship to you)

Name:
Address:
Postcode:
Tel No:
Email:
Relationship:

Name:
Address:
Postcode:
Tel No:
Email:
Relationship:

Signed Date

Please return this form to Daisy Brookman, Community Development Manager, Pavilion on the Park, 1 Kingfisher Rd, Eastleigh, SO50 9LH or email form to info@paviliononthepark.org