

“I want to volunteer!”

Registration Form



Please refer to the GUIDANCE NOTES when completing this form.

Your details – Title: _____ First Name: _____ Surname: _____

Address: _____ Town: _____

Borough: _____ Post Code:

Contact Number: _____ Email: _____

Support to volunteer

We believe that volunteering should be available to everyone. If you have had a key worker, support worker or social worker in the last 12 months **or** feel like you would require some additional support to help you volunteer– please tick the box

Is English your second language? If so, please tick the box

How do you want to find out about volunteer opportunities?

- I'd like to come along to your open session
- By email
- By phone
- By post

When can you volunteer?

Consent: I hereby give permission to the Volunteer Centre Wandsworth to use the information I have provided to identify volunteer opportunities that meet my needs, to contact me to find out if I have started volunteering, record my volunteer hours and to make a referral to volunteer organisations on my behalf. I also give permission for Wandsworth Borough Council, or nominated representative, to contact me to monitor the quality of the service and ask me how it can be improved.

Signed: _____ **Date:** _____

The information you have provided is confidential. We will not pass onto anyone without your permission. You may ask to see the information we hold on you at any time. You may ask for it to be removed at anytime. We may use it to compile statistical data from time to time, but this will never include references to a particular individual. We comply fully with the Data Protection Act.

You're Interests

You only need to complete this section of the form if you would like us to send you opportunities by email or through the post.

Area of Interest: <i>(Who/what would you like to help?)</i>	Type of Activity/Skill: <i>(What would you like to do?)</i>
Please tick appropriately	
Animals	Administration
Art and Culture	Advice Work
Children	Art
Disability	Befriending / Buddying
Disaster Relief	Business, Management & Research
Domestic Violence	Campaigning and Lobbying
Drugs and Addictions	Caring
Education and Literacy	Catering
Elderly	Coaching, Teaching & Training
Employment	Community Work
Environment	Counselling
Families	Driving
Gay, Lesbian, Bi & Transsexual	Entertainment
Health and Hospital and Hospices	Finance Work
Homelessness and Housing	Fundraising
Human and Civil Rights	Gardening
International Aid	Hostel Work
Legal Aid and Justice	Languages
Mental Health	Legal Work
Mentoring	Local Events
Museums	Marketing and PR and Media
Music	Music
Politics	National Events
Prisoners and Ex-Offenders	Practical Work and DIY
Race and Ethnicity and Refugees	Retail and Charity Shops
Religion	Teaching and Training
Sport and Outdoor Activities	Trusteeship / Committee Work
Women's Groups	Web Design, Computers & Technology
Youth	Youth Work

Equal Opportunities Monitoring Form

Volunteer Centre Wandsworth operates an **Equal Opportunities and Diversity Policy** as we believe that volunteering should be open to all. We monitor personal information to see who uses our services. **Only complete the sections that you feel comfortable with.** This section of the form will be removed from your contact details and stored separately. The information will be put onto a database that has restricted access.

Gender: Male Female

Age: Under 15 15-18 19-25 26-29 30-34 35-39 40-44 45-49
 50-54 55-60 60-64 Over 65

Employment Status: *(please tick)*

Employed Houseperson Asylum Seeker / Refugee
 Self-employed Student Unable to work Unemployed Retired

Ethnicity: *(please tick)*

Central Asian or Asian British

White and Asian Bangladeshi Pakistani Indian Other Asian _____

Black or Black British

Caribbean African White and Black Caribbean White and Black African

Any Other Black Background _____

Eastern Asian

Chinese Korean Japanese Any Other _____

White

British Irish European Any Other Mixed Background _____

Any Other White Background _____

Religion: *(please tick)*

Buddhist Christian Hindu Jewish Muslim Sikh None Other

Disability Status: Do you consider yourself to have a disability?

Yes No

Are you registered disabled?

Yes No

Thank you for completing this form