

Calder Vale Recreation Ground Charity

**VOLUNTEERS FORM**

If you are requesting to carry out work for the Calder Vale Recreation Ground (CVRG) Charity on a voluntary basis, section 1 of this form needs to be completed and signed by you (and/or parent if required) and returned to the CVRG Charity.  The CVRG Charity will complete section 2, sign and forward a copy of the completed form to you, for your retention and reference.

**SECTION 1** -

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| --- | --- |
| Name: |  |
| Address: |  |
| Contact Numbers: |  |
| Date of Birth: | \_ \_:\_ \_:\_ \_ \_ \_   \_ \_ years of age |
| If you are under 16 years of age when completing this form, parental permission and adult supervision whilst carrying out the volunteer work is required:  Parental Permission Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to above person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Reason for Volunteer work:  ie, grass cutting, painting… |  |
| Type of Volunteer work to be carried out, when and for how long:  ie, planting, grass cutting, litter picking, Saturday mornings, for 3 months |  |
| I have read the insurance guidelines | ◻Yes  ◻No |
| I agree to use the equipment and wear the protective equipment supplied by the CVRG Charity or if I am using my own equipment it is at my own risk. | ◻Yes  ◻No |
| I confirm I am physically fit and able to carry out the work expected and specified above. | ◻Yes  ◻No |
| I confirm the information in this form is accurate:  Signed by the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed by the Applicants Parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (only if required under the Date of Birth question) | |

**SECTION 2** - for completion by the CVRG

|  |  |
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| Agreed work to be carried out by volunteer, specifics: | Litter picking:  Day/s of week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start/End Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Equipment to be supplied: | Hi-vis vests  Other equipment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Presented and approved by CVRG Charity: | Committee:\_ \_:\_ \_:\_ \_    Full Council:\_ \_:\_ \_:\_ \_ |
| Information verified by the Secretary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Applicant copied form: \_ \_:\_ \_:\_ \_ | Start date confirmed as: \_ \_:\_ \_:\_ \_ |
| Equipment supplied: \_ \_:\_ \_:\_ \_ | Insurance covered: \_ \_:\_ \_:\_ \_ |

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