

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** -

|  |  |
| --- | --- |
| 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

|  |  |
| --- | --- |
| 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: \_ \_:\_ \_:\_ \_ |

Version 1:28/01/2020