

VOLUNTEER INDUCTION FORM

All information kept confidential

Name:

Date of Birth:

Age Group: 0-10

11-20

21-40

41-60

61-74

75+

Address:

Email Address:

Contact Number:

Emergency Contact Name:

(Family / School / Partner etc.)

Emergency Contact Number:

Health Considerations: (anything that may affect your work or your colleagues we would need to know, e.g. allergies / asthma / back trouble etc – information kept confidential)

Do you consider yourself to have a disability or long term health problem? Yes No

Cultural Background: White Black Asian Far East Asian Mixed Other

Photo Consent: Yes No (I consent for Durlston Country Park using photos of me, both online and in print – this consent can be withdrawn anytime by contacting staff)

Boot Size: (steel-toe cap boots will be made available to you and must be worn whilst undertaking practical volunteering tasks)

Dates of Volunteering: (e.g. days, suitable times)

Type of Volunteering: (e.g. practical, admin, counter)

Any other details:

Would you like to receive the Durlston Newsletter: (email) Yes No

I have read and agreed to the 'Volunteer Information' sheet :

Signed:

Date:

Office use only:

Work Party

Newsletter

Medical

Photo Consent