

Celtic Harmony: Volunteer Details

*(Information provided on this form is confidential and for internal use only,
and will not be disclosed without permission)*

Volunteer Position:

Name:

Address:

Postcode:

Daytime telephone number:

Email:

Current interests / skills you would like to use in volunteering:

Do you have any First Aid training / qualifications?

**Please describe any health or disability difficulties that may impact
on your volunteering, e.g. fitness for heavy outdoor work:**

*(This form is confidential – please tell us anything that you think might be relevant. By failing to do
so you could be putting yourself or others at risk)*

Do you have your own transport?

Are there any days / times when you are not available?

Emergency Contact details *(name and phone no. of someone we may
contact in case of an emergency):*

**Would you like to be contacted about future events at Celtic Harmony
Camp? Yes / No**

Date:

Signature:

**Please help us to gather information to improve our volunteer programme by providing the following information
(Please circle all those applicable):**

Are you:

Male / Female ?

Your age:

Under 16 / 16-19 / 20-25 / 26-35 / 36-59 / 60+

Are you in receipt of:

Disability / Incapacity Benefit / Income Support / Job Seekers Allowance?

Which of these best describes your ethnicity?

White: British / Irish / Other

Asian or Asian British: Indian / Pakistani / Bangladeshi / Other

Black or Black British: Caribbean / African / Other

Mixed Background / Other