

# volunteer registration

Please read this information carefully before you fill out and return this form

Thank-you for deciding to register as a volunteer. So that we can offer you support and advice please take a few minutes to complete this registration document. You can choose not to answer any question. If you are unsure about any part of this document please ask for advice or assistance.

## What we do with this information

**We will hold your information confidentially. Using the information we will try to match you with volunteering opportunities that appear to suit your preferences and availability. If we find a match we will contact you with the details of the volunteering opportunity; you can then decide if this is something you would like to become involved in as a volunteer or not. If not, we will continue to look for volunteering opportunities that you may be interested in. We will not send your name and contact details to an organisation seeking volunteers unless you have agreed with us that we may do so. We will never send anyone your personal details.**

**When you have completed this form please return it to:  
Freepost RLZJ-AREZ-RAYY,  
Volunteer Centre,  
London, SW2 5TU**

## Data Protection

1. At no time will we provide any of your details to a third party without your permission.
2. You have the right to see any information about you that we hold in a retrieval system such as a computer database or paper index system.
3. you have the right to challenge us about any information relating to you we hold in a retrieval system and have this changed.
4. You have the right for your details to be removed from a retrieval system.
5. We may compile statistical data from time to time but this will never include references to a particular individual.
6. In order to keep you up to date with information and events we may include you in our mailing list.
7. We will never sell or give our mailing lists to a third party.

## Criminal Record Certificates

Some opportunities require a criminal record check be carried on anyone wishing to volunteer with them this is often the case if the volunteering involves working with children or vulnerable persons. No criminal records checks will be made without your consent and you have been accepted as a volunteer for an organization requiring such a check to be made.

**LVAC Volunteer Centre**  
**LVAC Pilot Project**

## Your details and preferences

(Please circle one) Mr. Mrs. Miss. Ms.

First Name.....Salutation.....

Surname.....

Address.....

.....

.....Postcode.....

Do you agree to be contacted by the Volunteer Centre?

Yes  No

Daytime telephone.....Mobile.....

Email .....

How did you hear about this Volunteer Centre?

.....

Please tick each box when you could be available as a volunteer

	Mon	Tue	Wed	Thur	Fri	Sat	Sun
AM							
PM							
EVE							

Please give brief details of any previous voluntary work experience here.

Please take a few minutes to look through the following lists. The Areas of Interest and the Activities that you choose help us match you with the volunteering opportunities

<b>Areas of interest, please tick any of the following that apply to the opportunity</b>	<b>Areas of activity, please tick any of the following that apply to the opportunity</b>	
Animals	Administration	
Art and Culture	Advice, Information and Support	
Children	Architecture and Building Work	
Disability	Art	
Disaster Relief	Befriending and Buddying	
Domestic Violence	Business, Management and Research	
Drugs and Addiction	Campaigning and Lobbying	
Education and Literacy	Caring	
Elderly	Catering	
Emergency Services	Community Work	
Employment	Computers, Technology and Website Design	
Environment	Counselling	
Families	Driving	
Gay, Lesbian, Bi and Transsexual	Employee and Group Volunteering	
Health and Hospital and Hospices	Entertainment	
Heritage	Finance Work	
Homeless and Housing	First Aid	
Human and Civil Rights	Fundraising	
International Aid	Gardening	
Legal aid and Justice	General and Helping	
Mental Health	Hostel Work	
Mentoring	Languages	
Millennium Volunteers	Legal Work	
Museums	Local Events	
Music	Marketing, PR and Media	
Politics	Mentoring	
Prisoners and Ex-Offenders	Music	
Race and Ethnicity and Refugees	National and International Events	
Religion	Officials	
Sport and Outdoor Activity	Practicle Work and DIY	
Women's Groups	Retail and Chrity Shops	
Youth	Sport Development	
	Teaching, Training and Coaching	
	Trusteeship and Committee Work	
	Under 16 Volunteering	
	Youth Work	

Date of birth..... Gender    Male    Female    (circle one)

What age group do you belong to:		Recruitment Method:	
Under 15	<input type="checkbox"/>	40 - 44	<input type="checkbox"/>
15 - 18	<input type="checkbox"/>	45 - 49	<input type="checkbox"/>
19 - 25	<input type="checkbox"/>	50 - 54	<input type="checkbox"/>
26 - 29	<input type="checkbox"/>	55 - 59	<input type="checkbox"/>
30 - 34	<input type="checkbox"/>	60 - 64	<input type="checkbox"/>
35 - 39	<input type="checkbox"/>	Over 65	<input type="checkbox"/>

What is your employment status:	
Employed	<input type="checkbox"/>
Houseperson	<input type="checkbox"/>
Non employed	<input type="checkbox"/>
Retired	<input type="checkbox"/>
Student	<input type="checkbox"/>
Unable to work	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>

What ethnic group do you belong to	
White British	<input type="checkbox"/>
White Irish	<input type="checkbox"/>
Other White background	<input type="checkbox"/>
White & Black Caribbean	<input type="checkbox"/>
White & Black African	<input type="checkbox"/>
White & Asian	<input type="checkbox"/>
Other Mixed background	<input type="checkbox"/>
Other Background please state	<input type="checkbox"/>
Chinese	<input type="checkbox"/>
Indian	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>
Other Asian Background	<input type="checkbox"/>
Black Caribbean	<input type="checkbox"/>
Black African	<input type="checkbox"/>
Black British	<input type="checkbox"/>

Nationality..... Religion.....

Are you disabled?    No            Yes            Self Classified            (please circle)

Please complete these questions if you drive, circle the ones that apply

Insured for voluntary driving?            Yes            No

Own transport available?            Yes            No

What can you drive and what license type do you hold?

Car Automatic    Yes            No

Car Full            Yes            No

Car Provisional    Yes            No

HGV - Class 1    Yes            No

HGV - Class 2    Yes            No

HGV - Class 3    Yes            No

Motorcycle        Yes            No

PSV/Coach        Yes            No