**About you:**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Tel. No |  |
| Email | Please tick here if you are happy for us to add you to the STAA supporters mailing list |
| Date of Birth  (if you are under 18) |  |

**Emergency Contact**

In the case of a medical emergency we may need to contact a member of your immediate family or support network on your behalf. Please share current information below and inform your emergency contact of this sharing.

|  |  |
| --- | --- |
| Name |  |
| Relationship to you |  |
| Contact information |  |

**Medical Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have any current or past medical conditions we need to be made aware of, including allergies, disabilities, physical and mental health issues? | Yes |  | No |  |
| If Yes, please give details: | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you currently on any medication? | Yes |  | No |  |
| If Yes, please give details: | | | | |

**Your availability (please tick all that apply)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Weds | Thurs | Fri | Sat | Sun |
| Am |  |  |  |  |  |  |  |
| pm |  |  |  |  |  |  |  |

**What are your specific skills and interests? (Please tick all that apply)**

**Skills:**

|  |  |  |  |
| --- | --- | --- | --- |
| Wildlife/Conservation |  | Administration |  |
| Gardening |  | Fundraising |  |
| Horticulture |  | Media/promotions |  |
| Heritage |  | Crafts |  |
| Working with people |  | DIY type skills |  |
| Working with children |  |  |  |
| Other: please describe | | | |

**Reasons for volunteering**

|  |  |  |  |
| --- | --- | --- | --- |
| Chance to be involved with an interesting project |  | Want to give something back to the community |  |
| To be outdoors |  | Exercise |  |
| Help with career prospects |  | To make friends/meet people |  |
| To learn new skills |  |  |  |
| Other: please describe | | | |

**Any other information you’d like to tell us about?**

|  |
| --- |
|  |

**How did you find out about volunteering at St Anns Allotments?**

|  |
| --- |
|  |

**Signed** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_