

**Volunteer Application Form**

**Netball Europe Open Competition**

12th – 15th May 2016

All applications to be sent to:

Email: volunteering@englandnetball.co.uk

Post: Kat Valk, Volunteer Development Manager, England Netball, Netball House, 1-12 Old Park Road, Hitchin, Hertfordshire, SG5 2JR

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| **First Name** |  |
| **Last Name**  |  |
| **Email**  |  |
| **Are you a member of Pass on your passion**  |  |

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| --- | --- |
| **Date of Birth**  |  |
| **Gender**  |  |
| **Address** |  |
| **Town/City**  |  |
| **County**  |  |
| **Country**  |  |
| **Post Code** |  |
| **Region** |  |
| **Mobile**  |  |
| **Landline** |  |
| **Have you been referred by another volunteer if yes who, name and email.**  |  |
| **Emergency contact name**  |  |
| **Emergency contact number**  |  |
| **Clothing Size** |  |
| **Do you have a disability, medical condition, illness or allergies we should be aware of:**  |  |
| **Please provide brief details** |  |
| **Have you ever been Convicted of any Criminal Offence**  | **Yes No**  |

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| **Have you Volunteered for England Netball events team before? If Yes, please provide event name and role.**  |  |
| **Have you previously volunteered in any other area/sport** |  |
| **Please provide brief details**  |  |
| **Any Dietary requirements** |  |
| **Which Club/Organisation are you from**  |  |

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| **Coaching Qualifications** |  |
| **Date achieved** |  |
| **Officiating Qualifications** |  |
| **Date achieved**  |  |
| **Other relevant experience/qualifications**  |  |
| **Have you any previous convictions for a criminal offence or are any legal proceedings pending** |  |

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| Please tick all you wish to be considered for | **12th May** | **13th May** | **14th May** | **15th May** |
| **Ball Patrol Team Leader**  |  |  |  |  |
| **Athlete Service Team**  |  |  |  |  |
| **Accreditation Manager**  |  |  |  |  |
| **Merchandise/Programme Seller** |  |  |  |  |
| **Volunteer Coordinator** |  |  |  |  |
| **Event Crew**  |  |  |  |  |

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| **Volunteer Collection Details (only applicable to under 18’s)**Please confirm collection details of the volunteer (delete as appropriate): * They will be collected at …………………………(location, time) by………………………… (full name)

**Or** They are making their own way home       |
| **Parental/Guardian Consent if under 18 (if over 18, please complete yourself)** I, (parent/guardian full name)………………………………………………………………… agree to (full name of volunteer) ……………………………………………………….taking part in the event described above and have read the information sheet.Name (print): Signed……………………………………………………………………………………… Date……………………………………………………………. |
| **Declaration** |
| I declare that to the best of my knowledge the information on this form is true and accurate. **I accept that false information or omission may lead to my being prevented from acting as a Volunteer now or in the future.** |
| **Signature** |                                | **Date** |                                |