



ASLA

Active for Scottish Love in Action

Volunteer Registration Form



Thank you for your interest in volunteering with SLA. In order to ensure we follow best practice in recruiting and supporting our volunteers, we ask everyone to complete a registration form. Please complete this form as comprehensively as you can so that together we can find a role that is right for you.

Name:

Address:

Post Code:

Email Address:

Tel:

Mobile Number.

Date of Birth:

How did you hear about volunteering for SLA?

- Newspaper Article
- Website
- Friend
- Fundraising event
- Other; please give us details.

To enable us to find the most suitable volunteering opportunity for you please complete the following section.

Please give detail of any special skills or relevant hobbies. (Please use separate sheet if necessary)

Please give detail of any previous or current voluntary work, employment or studies you feel are relevant. (Please use separate sheet is necessary)

Please let us know of any health issues you think we should be aware of (including if you have a disability and if you require any equipment/special facilities in order to assist you in potential voluntary work).

Are there any aspects of volunteering with SLA in which you are particularly interested?
(Tick as many as you like)

- Office work
- Fundraising
- Selling at events
- Fireworks (Event Annual)

What is your preferred method of contact?

- Email
- Telephone; when is the best time to contact.
- Post

Volunteering availability

Weekly/Monthly/Occasionally/When required.

Would you please supply us with the names of two referees?

(If an existing SLA volunteer is willing to act as referee then you only required to give their name)

Referee 1

Referee 2

Name

Name

Address

Address

Relationship to volunteer

Relationship to volunteer

In accordance with the 1998 Data Protection Act I agree that SLA may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form, will be stored on a computerized data base but will be held securely and only accessed by authorized personnel. Thank you for completing this form.

Please complete, sign and date this form and return to SLA, St Ninian's Centre, 140 The Pleasance, Edinburgh EH8 9RR

Signature _____

Date_____