**Volunteer Information - TH Support Volunteer**

|  |  |
| --- | --- |
| Name |  |
| Address  |  |
| Phone Number/s  |  |
| Email |  |
| Emergency Contact Name  |  |
| Emergency Contact Phone Number |  |

**Do you have useful skills that you would like to use here? In particular gardening experience and/or experience of working with people who have support needs.**

**Please provide details.**

**What would you like to do while you are here?**

For example:

Supporting volunteers in the gardens / fundraising / marketing / help out at events / baking cakes/other (give detail)

Please provide more details if necessary:

To ensure we are able to support volunteers effectively, we have a rota for TH Support Volunteers and like a regular commitment. Please indicate what availability you have.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Tuesday | Wednesday | Thursday | Friday (women only) |
| AM |  |  |  |  |
| PM |  |  |  |  |

**MORE FOLLOWS …**

**I agree to Martineau Gardens keeping and processing this information. I understand that staff will take reasonable care of security.**

Some will be kept on a database for ‘Social Accounting’ (what kind of people we work with, what benefits the work has and how many people there are).

YES / NO

**I have been given ‘A Guide to Martineau Gardens’, the Volunteer Policy and ‘How we treat each other’ (Roles and Meetings)**

YES / NO

**I have completed the anonymous Wellbeing Survey**

YES / NO

**I have been given me the opportunity to sign-up for news and events info**

YES / NO

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_