

**Volunteer Application Form**

**Vitality Netball Super League Grand Final**

**7th May 2016, Copper Box Arena, London**

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

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

|  |  |
| --- | --- |
| Date of Birth  |  |
| Gender  |  |
| Address |  |
| Town/City  |  |
| County  |  |
| Country  |  |
| Post Code |  |
| 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**  |

|  |  |
| --- | --- |
| 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 |  |

**Grand Final**

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| **Roles, please tick the roles you would prefer to undertake** |
| **Volunteer Coordinator** |  |
| **Accreditation Team** |  |
| **Ball Patrol**  |  |
| **Ball Patrol Coordinator**  |  |
| **Guard of Honour** |  |
| **Guard of Honour Coordinator**  |  |
| **Event Crew**  |  |
| **Event Crew Team Leader**  |  |
| **Ticket Collection Assistant** |  |
| **Merchandise/Programme Seller Assistant**  |  |
| **Merchandise/Programme Seller Team Leader** |  |
| **Concourse Manager**  |  |
| **Media Assistant**  |  |
| **Admin Assistant - Please provide details of the days and times you wish to help.**  |  |

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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** |                                |