

Volunteer Application Form

Name			
Date of Birth		National Insurance no.	
Address			
Postcode			
Tel. number		Mobile number	
Email			
Emergency contact 1		Emergency Contact 2	
Name		Name	
Relationship to you		Relationship to you	
Contact no		Contact no	
Medical Information			
Doctor's name		Tel. No.	
Address			
Details of known allergies			
Any health information we need to know			
Details of any medication taken (any medication must be kept away from our servicers)			
Date of last Tetanus immunisation			

Please can you tell us why you want to volunteer with Kangaroos

How did you hear about Kangaroos?

Please tick the areas where you are particularly interested in volunteering

Support our activities and sessions		Help in our office	
Help at fundraising events		Work on our social media platforms	

References

Professional referee (Tutor/Teacher/Employer)

Name	
Position	
Address	
Email	

Personal referee (An adult that is not a relative, who has known you for at least 3 years)

Name	
How they know you	
Address	
Email	

Rehabilitation of Offenders Act

I have convictions, cautions or pending court cases	Yes		No	
Details attached	Yes		No	
I understand that this role is subject to a satisfactory enhanced DBS check (if 16 years or over)	Yes		No	
I confirm the above information is correct				
Signed		Date		

If you are under 18 years old, please ask your parent/carer/guardian to read and sign the section below:			
Signed		Date	
Name		Relationship to volunteer	

Thank you for completing this form

Please email to: Denise@kangaroos.org.uk
 or post to Denise Tester, Kangaroos, Unit 7 & 8, More House Farm Business Centre,
 Ditchling Road, Haywards Heath, W. Sussex RH17 7RE

Kangaroos comply with the GDPR Data protection act 2018 to ensure that all information about you that is held by us is processed in accordance with the Act.