Candover Valley COMMUNITY STORE

Volunteer Application Form

Section	1: Pers	sonal de	etails				
Full Nan	ne:						
Address	::						
Post cod	de:						
Telepho	ne:						
Email:							
Age and	date of	birth if u	nder 18:			•••••	
Signatu	re of pare	ent or gu	ardian if	under 18			
1) My p	Mon Mon	Tues	t(s) is: (pl	ease tick) Thurs	Fri	Sat	Sun
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
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AM PM							
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Person to be contacted in case of emergency:
Name:
Telephone:
Any relevant medical information?
Any other information?
We may also from time to time use photos of our volunteers for publicity purposes. Please
sign below to confirm if you are willing for your photo to be used in this way.
Signature
or
Photo not to be used
Signature

Data protection statement

Under the Data Protection Act 1998 and GDPR 2016 we will ensure that the data you supply to us is processed with skill and care and in accordance with the legislation and codes.

The Candover Valley Community Store will keep the information you have provided on this form so we can contact you about volunteering in the store, organise rotas and provide you with information of interest to you as a volunteer.

We will destroy this information when you cease to act as a volunteer. We will not divulge your information to any third parties.

Please return completed forms to Jane Laws, Bermondspit House, Berrydown Lane, Axford, RG25 2HG or email to jane@rosslaws.co.uk