



involved North London Volunteer Registration Form

Personal Details

First Name(s) Last Name(s)

Male Female Date of Birth/...../..... Age

Mobile Tel No. (Home).....

Address

Postcode Email.....

When is the best time to contact you? (e.g. after 5.00pm)

Emergency Contact Details

Name Relationship

Address

..... Postcode

Tel Nos. Home/Work Mobile

Volunteering Details

Have you done any volunteering before? Yes No

If yes, was this during the last 12 months? Yes No

Availability (please tick all that are appropriate) *this is a guide only and can be changed or discussed.

Full time Part time School term School holidays

Long term Short term Other (please state)

Please write down up to 3 areas of interest you might like to volunteer in. This helps us to match you with volunteering opportunities and is open to discussion with your Advisor.

1)..... 2)..... 3).....

Other Information

Volunteers who will be working with children or vulnerable groups will have to be police checked before volunteering begins.

If you have a criminal record it will NOT automatically exclude you from volunteering.

However the following information would be useful to know before sourcing your placement/s:

Do you have a criminal record? YES NO

Publicity

Thank you for taking part in **vinvolved**. Project staff or their representatives are encouraged to photograph projects to help promote the organisation and its aims. By consenting you are adding to your voluntary work by helping **vinvolved** North London reach an even wider audience.

Images from your volunteering may be used to promote **vinvolved** in printed materials, in electronic media, and to the press.

By signing below you consent to the following:

1. I agree to allow photos of myself to be reproduced to promote **vinvolved** North London and volunteering.
2. I agree to the use of my name in any caption.
3. **v** can use your photo and quotes for PR & Marketing purposes

I agree to appear in any **vinvolved North London publicity**

(Please sign on the line above, if you agree)

If you would like to add any specific restrictions to the use of images, please state them here:

.....
I **do not** agree to appear in any **vinvolved** North London publicity

BTCV will hold your details for marketing purposes in accordance with the 1998 Data Protection Act. If you do not wish to receive any invites to social get-togethers or more general information please tick this box.

Declaration

I declare that the above details are correct to the best of my knowledge. I understand these will be stored on the **vinvolved North London databases and used for statistical purposes. I also understand that any part of this information, if requested, will be forwarded to organisations, where I wish to volunteer.**

Print Name **Signature** **Date**...../...../...



Equal Opportunities

Involved is an equal opportunities initiative. To help us achieve this we ask for information so we can find the best volunteering opportunity for you. If you need explanations on any of the following terms please ask your Involved North London Advisor.

Do you have any of the following disabilities, difficulties or health problems?

(please tick if relevant)

Learning Difficulty	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>	Sensory Disability	<input type="checkbox"/>
Long term or Life-limiting Illness	<input type="checkbox"/>	Mental Health Issues	<input type="checkbox"/>	Physical Disability	<input type="checkbox"/>
Multiple Disabilities	<input type="checkbox"/>	I Prefer Not To Say	<input type="checkbox"/>		

Other (please specify)

Please give brief details if you think it would help us to support you in your volunteering.

Which of these groups do you belong to (please tick one box).

Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Other Asian Background	<input type="checkbox"/>
Black Caribbean / Black British Caribbean	<input type="checkbox"/>	Black African / Black British African	<input type="checkbox"/>
Other Black Background	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Black Caribbean & White	<input type="checkbox"/>	Black African & White	<input type="checkbox"/>
Asian & White	<input type="checkbox"/>	Other Dual Heritage Background	<input type="checkbox"/>
Roma	<input type="checkbox"/>	Irish Traveller	<input type="checkbox"/>
White British	<input type="checkbox"/>	White Irish	<input type="checkbox"/>
Other White Background	<input type="checkbox"/>	Greek Cypriot	<input type="checkbox"/>
Turkish Cypriot	<input type="checkbox"/>	Kurdish	<input type="checkbox"/>
I Prefer Not To Say	<input type="checkbox"/>		

Other (please specify)

Do any of the following apply to you: (please tick any relevant boxes)

Employed part time	<input type="checkbox"/>	Employed full time	<input type="checkbox"/>
In Education/Learning	<input type="checkbox"/>	In Training	<input type="checkbox"/>
Not Employed and in training	<input type="checkbox"/>	Not Employed not in training	<input type="checkbox"/>
Self-employed	<input type="checkbox"/>	I Prefer Not To Say	<input type="checkbox"/>

Other (please specify)

Do you have... (please tick which qualifications you have)

No Qualifications	<input type="checkbox"/>	NVQ or Equivalent	<input type="checkbox"/>	GCSE	<input type="checkbox"/>	A-level	<input type="checkbox"/>
Degree	<input type="checkbox"/>	Postgraduate	<input type="checkbox"/>	I Prefer Not To Say	<input type="checkbox"/>		

Other (please specify)

Which of these groups do you belong to: (please tick one box).

Bisexual	<input type="checkbox"/>	Gay	<input type="checkbox"/>	I Prefer Not To Say	<input type="checkbox"/>
Straight/heterosexual	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>	Other (please specify).....	

Please tick if any of the following apply to you:

Low Income	<input type="checkbox"/>	Homeless	<input type="checkbox"/>	Lone Parent	<input type="checkbox"/>
At Risk of Exclusion	<input type="checkbox"/>	Offender/Ex-Offender	<input type="checkbox"/>	Young Carer	<input type="checkbox"/>
In or Leaving Care	<input type="checkbox"/>	Refugee or Asylum Seeker	<input type="checkbox"/>	I Prefer Not To Say	<input type="checkbox"/>



CONSENT FORM

..... has expressed an interest in volunteering with **vinvolved** North London. As they are under 18, we require parental/guardian consent in order for them to undertake any volunteering activity.

On occasion **vinvolved** staff or their representatives are encouraged to photograph volunteering activities in order to promote the project and its aims to potential new volunteers and supporters. Images from volunteering may be used to promote **vinvolved** in printed materials, in electronic media, and to the press.

By signing below you consent to the following:

1. You agree to allow photos of your child's volunteering to be used to promote BTCV and **vinvolved**.
2. You agree for their name to be used in any caption relating to the **vinvolved** scheme.
3. **v** can use your photo and quotes for PR & Marketing purposes

Please tick here if you do not agree for your child to appear in any publicity

If you require any further information please do not hesitate to contact:

Pat Kennedy mobile: 07801686048

or

Emily Walpole mobile: 07917460473

VINVOLVED

52 Moxon Street

High Barnet, Middlesex

EN5 5TS

Office telephone number: 0208 364 8400

I give my permission forto participate in **vinvolved** North London, including publicity (unless you have ticked the box withdrawing consent).

.....Signature of parent/guardian Print Name

Date/...../20.....

In order to minimise the delay before commencement of volunteering please can you return this form as soon as possible

Thank you on behalf of the BTCV Youth Programmes London





Volunteer Plan

Name:

Date:

In order to register with V-North London you need to fill out the following information. If you need help or guidance in filling out this form please contact our main office on 02078434288.

1. What type of volunteering would you like to do?

2. What geographical area would you prefer to work in, are you prepared to travel and if so how far?

3. What do you hope to achieve personally through volunteering e.g. experience, skills, meeting new people etc.?

4. How do you think your volunteering may benefit the local community?

5. What qualities, skills and experience can you bring to your volunteering?

6. How many hours of volunteering would you like to achieve?

7. How long would you like to volunteer for?

[Thank You on Behalf of the Youth Programmes London](#)

vinvolved team
national youth volunteering programme

Supported by
V Inspiring
a million
more young
volunteers