

Volunteer Application Form

This form has four pages. If you need help completing it, please contact the Volunteer Co-ordinator on 01926 927820 or by email at volunteers@britishmotormuseum.co.uk

| Personal details | |
|---|--|
| Mr/Mrs/Miss/other : | |
| First name: | |
| Surname: | |
| Address: | |
| | |
| | |
| Postcode: | |
| Telephone numbers: | |
| Day: | |
| Eve: | |
| Mobile: | |
| Email address: | |
| Date of Birth: (you must be over 18 to apply & be between 25 & 80 to drive cars in the collection) | |

Availability

Let us know which days and times you would like to volunteer

| | Mon | Tue | Wed | Thurs | Fri | Sat | Sun |
|---|-----|-----|-----|-------|-----|-----|-----|
| AM | | | | | | | |
| PM | | | | | | | |
| How much time can you offer, e.g. ½ day / full day - per week / fortnight/ month etc: | | | | | | | |

| Emergency contact details | |
|----------------------------------|--------|
| Name of emergency contact person | |
| Address | |
| Telephone numbers | |
| Home | Mobile |
| Relationship to you | |

Are you or have you ever been a volunteer?
If you have experience of volunteering, let us know what you've been doing

Why would you like to volunteer at the British Motor Museum?

Why would you make a good volunteer?
What skills and relevant experience do you have?

How did you hear about Volunteering?

References

Please provide contact details of two people (not related to you) who we can contact to vouch for you.

Person 1

Mr/Mrs/Miss/other :

First name:

Surname:

Address:

Postcode:

Telephone number:

Email address:

In what capacity known?

Person 2

Mr/Mrs/Miss/other :

First name:

Surname:

Address:

Postcode:

Telephone number:

In what capacity known?

email address:

Rehabilitation of Offenders Act

Do you have any unspent criminal convictions?

Yes

No

- **Data Protection Act** : we will comply with current Data Protection legislation and guidance in the handling of all information we hold on all volunteers;
- **The British Motor Museum is an equal opportunities organization**
- **To Volunteer you must be 18 or over**

Declaration

Please sign below to confirm that the information you have provided on this form is true to the best of your knowledge

Signature:

Date:

Please return this form to:

The Volunteer Co-ordinator
British Motor Museum, Banbury Road, Gaydon, Warwickshire CV35 0BJ