**RAY CEREDIGION VOLUNTEER REGISTRATION FORM**

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| **Personal details**  |
| Name  |  | DOB |  |
| AddressPostcode  |  |
| Email |  |
| Home phone |  | Mobile phone |  |
| **Emergency contact details**  |
| Name  |  |
| Relationship to volunteer  |  |
| AddressPostcode  |  |
| Email |  |
| Home phone |  | Mobile phone |  |
| **Health & Wellbeing** |
| Do you have any physical or medical conditions that we need to be aware of?[ ]  Yes [ ]  No  **Please specify:**  |
| Do you require any medication that we need to be aware of?[ ]  Yes [ ]  No **Please specify:**  |

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| **Where you can help**These are the areas where RAY can offer volunteering opportunities. Please let us know the activities that interest you. Before you start volunteering we will meet with you to discuss your interests in more detail, plus provide you with a Role Description and a Volunteering Handbook. Tick all that take your interest |

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| [ ]  Supporting young adults with disabilities  | [ ]  Arts and Crafts  |
| [ ]  Supporting families with pre-school children  | [ ]  Cooking |
| [ ]  Supporting people with dementia and their carers  | [ ]  Gardening and wildlife  |
| [ ]  Supporting primary aged children  | [ ]  Office work  |
| [ ]  Marketing and promotion including online  | [ ]  Supporting teenagers |
| [ ]  Delivering training  | [ ]  Finances  |
| [ ]  Anything else not listed above  |

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| **Details of any previous posts you have held paid or voluntary or any other activities including education or training**  |
| Organisation  | From: To (month/year) | Details  |
|  |  |  |
| **Anything you want to share with us about your interest in volunteering**  |
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| **Disclosure and Barring Service checks** Please note: depending on your volunteering role a disclosure and barring service (DBS) check may be required. Previous convictions don’t automatically bar you from volunteering, but a failure to disclose would terminate any volunteering placement, and any convictions will be considered on a case by case basis in relation to the volunteering role. |
| Do you have any criminal convictions? [ ]  Yes [ ]  No  |
| If Yes please give details. *This section does not apply if under 16* |
| **Driving**  |
| If you have a full, clean, valid UK driving licence would you be interested in attending training to drive the RAY van or minibus? [ ]  Yes [ ]  No  |

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| **References –** Please provide the names and contact details of two referees – where possible this should be someone in a senior position in a recent employment, volunteering placement or educational establishment – if not applicable please provide someone who has known you for at least 2 years but is not related to you  |
| 1. **Referee**
 | 1. **Referee**
 |
| Name: | Name: |
| Address: | Address: |
| Postcode: | Postcode: |
| Phone number: | Phone number: |
| Relationship to volunteer: | Relationship to volunteer: |
| E mail address: | E mail address: |

*RAY Ceredigion complies with the General Data Protection Regulation (GDPR) 2018 and we keep personal details securely and confidentially. One copy of each registration of interest form will be kept securely and confidentially by RAY Ceredigion for audit purposes in line with our funding bodies’ requirements and retention schedules. RAY Ceredigion also uses your personal data (from your volunteer registration form) to help offer you a suitable volunteer role, to keep in contact with you and in case of accidents or medical emergencies. GDPR 2018 requires us to gain your consent to this. RAY Ceredigion will assume that your consent has been when you sign and return this form (electronic or hand written).*

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| **Declaration & Consent** I confirm that the information given on this form is correct and I agree to read through and follow RAY Ceredigion policies and procedures as outlined in the Volunteers Handbook and any other RAY policies and procedures |
| Signature |  | Date |  |

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| **Volunteers aged 14 & 15** **For Volunteers aged under 16 a parent or guardian needs to countersign to verify the information above is correct and to confirm consent to the volunteering placement**  |

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| Print name  |  | Signature  |  |
| Relationship to child |  | Date  |  |

**Thank you for your interest in volunteering with RAY Ceredigion**

**We look forward to receiving your registration form**

**RAY welcomes volunteers from age 14 to retirees**

**and aims to support all abilities in our volunteering placements**

Please return this form by post to:

RAY Ceredigion Volunteering Coordinator

RAY Ceredigion, Pengloyn, Tabernacle Street,

Aberaeron, Ceredigion SA46 0BN.

Or by email to: rayvolunteering@rayceredigion.org.uk

For any further information please contact the RAY Volunteering Coordinator

rayvolunteering@rayceredigion.org.uk

RAY Office phone 01545 570 686 / RAY Volunteering Mobile 07500 802 590

**You can find out more about RAY at** [**www.rayceredigion.org.uk**](http://www.rayceredigion.org.uk)

**and on our Facebook pages** [**https://www.facebook.com/RAYCeredig**](https://www.facebook.com/RAYCeredig)

**and** [**https://www.facebook.com/Canolfan-Teulu-RAY-Family-Centre**](https://www.facebook.com/Canolfan-Teulu-RAY-Family-Centre)