



WayfinderWoman Volunteer Registration Form

Name:	Email:
Contact number/s:	Address:
Do you have a Driving Licence? YES / NO	Are you able to access rural locations? YES / NO

Notes/Follow up

Please supply the names and email addresses of two referees. One should be someone who has known you for three years and neither can be relatives. Write in caps for ease of reading.

Name:	Name:
Email:	Email:
Occupation:	Occupation:

Please tick the following:

- I agree to a DBS check if required.
- I understand that my details are being held under GDPR and that they will only be shared to a third party if required for fulfilment of a volunteering role.
- I am happy to have my name included on any newsletter listing.

<https://wayfinderwoman->

my.sharepoint.com/personal/volunteer_wayfinderwoman_com/Documents/Shared/ADMIN/VOLUNTEERS/VOLUNTEER FORMS 2023/WFW Volunteer Registration Form.doc



What is your availability?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Where did you hear about WayfinderWoman?

Why would you like to volunteer at WayfinderWoman?

What would you like to get out of the role?

How can we help you?

What experience can you bring to the role?

I declare that to my knowledge the information I have given is true and complete:

Signature: _____ Date: _____

WayfinderWoman Trust, Unit 1, Highlight House, 8 St Leonards Road, Eastbourne BN21 3HU 01323 886171

Registered charity no:1175486

https://wayfinderwoman-my.sharepoint.com/personal/volunteer_wayfinderwoman_com/Documents/Shared/ADMIN/VOLUNTEERS/VOLUNTEER FORMS 2023/WFW Volunteer Registration Form.doc