



RUGBY WINTER SHELTER 2016-17
LOCAL CHURCH - NEW VOLUNTEER REGISTRATION FORM

If you are volunteering at your local church for the first time your Team Leader has a different form for you to complete please. If, however, you are volunteering to work in a venue other than that of your local church, if any, please kindly use this form. Thank you for volunteering with Hope 4 (Rugby) Ltd – we appreciate your time and commitment to our work.

First Name _____ Surname _____

Male / Female (please circle)

Address _____

Post Code _____

Home Tel _____ Mobile _____

E-mail _____

Which is your preferred team venue and shift ? 19.00-22.00 OR 22.00 – 07.00 OR 07.00 -09.00?

Table with 4 columns: Day, Venue, Please tick, Preferred Shift. Rows include Sat Rugby Methodist Centre, Sun St John the Baptist, Mon St Marie's, Tue St George's, Wed Rugby Baptist, Thur m2o, Fri Salvation Army.

Referee:(name)

..... (tel) (email)

May we contact your referee directly? YES / NO

Signed:(volunteer)

Date

Hope 4 is committed to protecting your privacy. We will only use information which we collect about you lawfully (in accordance with the Data Protection Act 1998).

Please return this form to The Rugby Winter Shelter Co-ordinator
The Hope Centre 8 Newbold Road Rugby CV21 2LJ

Chairman: Revd Dr Michael I Bochenski; Secretary: Joyce Woodings Safeguarding Trustee: Barbara Coleman
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