



Volunteer Application Form

**C/O Council For Voluntary Service, Blackpool, Fylde and Wyre,  
95 Abingdon Street, Blackpool FY1 1PP**

[www.blackpooltiggers.co.uk](http://www.blackpooltiggers.co.uk)

**07966-067-937 01253 319210**

*The information you provide on this form will be kept in strictest confidence and will only be used to assist Blackpool Tiggers in its selection process  
Blackpool Tiggers is working towards equality of opportunity*

Name .....

Address .....  
.....  
.....

Telephone .....Mobile .....

E Mail .....

Please note that our communications are based on e-mail, txt and access to the website. Without these you will have to make additional efforts to keep in touch.

Date of Birth ..... Age .....

(Volunteers aged between 16 – 25 will automatically be invited to join either the Sport England Sport Volunteer Scheme or the Millennium Volunteer Scheme, are you already registered on a scheme yes/no\*)

Which Blackpool Tiggers role would you like to do? (please tick)

- Role A  Play & Social Activity Helper for Autistic Children
- Role B  Sports Activity Helper for Autistic Children
- Role C  Club Event and Fund Raising Organiser
- Role D  Club Grant Co-Ordination
- Role E  Club Newsletter and Member Communications
- Role H  Music Activity Helper
- Other (Describe)

Why do you want to volunteer with us?

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What would you like to gain from your volunteering experience?

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What previous voluntary work, paid employment or studies have you done which may assist you in your voluntary work?

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Do you have any relevant experience?

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How many/which hours are you available each week?

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As part of the selection process for volunteers, Blackpool Tiggers always asks for references to be taken. Please give the names and addresses of two referees. Please do not include any relatives or people under 18.

1 Name..... 2 Name.....  
Address..... Address.....  
.....  
.....  
.....  
.....  
Tel No..... Tel No.....

How did you hear about Blackpool Tiggers?

.....  
.....

I certify that the information given is correct

Signature..... Date...../...../.....

**For office use only**

Date returned...../...../..... Date of interview...../...../.....  
References requested...../...../..... References received...../...../.....  
CRB check necessary? Yes/No ...../...../..... Session Attendance Date [ / / ]  
Follow up action  
Session Commencement Date [ / / ] Probation Completion Forecast [ / / ]  
CRB sent [ / / ] Consent Form completed Y/N, Child Protection Statement Y/N  
Mil Vol, Sport Eng notified or N/A [ / / ]  
T Shirt issued [ / / ]  
Application for training courses [ / / ]  
Mentor Allocated [ / / ] Name .....