



## Volunteer Application Form

Name	
Phone Number	
Email Address	
Address	

Please tick the area/s that interest you the most:

Front of House/Reception	<input type="checkbox"/>	IT/Computers	<input type="checkbox"/>
Board/Governance	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
Finance	<input type="checkbox"/>	Events	<input type="checkbox"/>
Building Maintenance	<input type="checkbox"/>	Collections	<input type="checkbox"/>
Gardens	<input type="checkbox"/>	Restorations	<input type="checkbox"/>

What time are you able to give to Mangawhai Museum: *(please circle)*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Weekly	Fortnightly	On Call/Casual				

Do you have any health concerns or requirements we might need to know about? If yes, please explain:

Any additional areas of experience/expertise that you are happy to share. Are you happy for us to call on you if we need assistance with this?

## Emergency Contact Person

Name:

Phone Number:

Relationship:

### **Declaration:**

The information I have given on this form is true and correct. I declare I have not been engaged in any criminal activity or had any criminal convictions or have any criminal prosecutions pending. The information relating to this statement is subject to my rights under the Criminal Records (Clean Slate) Act 2004.

Signature:

Printed Name:

Date:

### **Privacy statement:**

**Privacy Act 1993** Personal information about you on your Application Form is confidential and will be stored on Museum volunteer database available to subcommittee leaders, board members and management. It will only be used for the purpose of your role as a volunteer in this organisation. If you ask us in writing, when you leave our organisation, we will remove your details from our database.

Signed:

Date: