Gainsborough's House

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| **Volunteer Information** (Block capitals please) |
| Name |  |  | Home Number |  |
| Address |  | Mobile Number |  |
|  |
|  | Email address |  |
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|  |
| **Emergency Contacts** |
| Contact Name |  |  | Relationship |  |
| Phone Number |  | Mobile number |  |
|  |
| Contact Name |  |  | Relationship |  |
| Phone Number |  | Mobile number |  |
|  |
| **Comments** (please provide details of any medical, mobility or personal information that we should be aware of when you are volunteering) |
| Medical/Mobility |  |
| Other |  |
|  |
| **Volunteering History** |
| How long have you been volunteering with us? Start date if known |  |
| Which areas are you interested in helping? |
| Gallery Steward AmbassadorWelcome Host Education - SchoolsCamera Obscura Guide Education - FamiliesTour Guide Education - Museum ClubShop GardenEvents/Groups Catering Admin |
| When we reopen, when would you like to help us? |
| Frequency:Weekly Fortnightly MonthlyStudent Holidays Gap FillerGallery Steward, Welcome Host & Retail Roles Garden & Admin Roles10.00-12.30 12.30-2.30 2.30-5.00 AM PMMonday MondayTuesday TuesdayWednesday WednesdayThursday ThursdayFriday FridaySaturday SaturdaySunday Sunday |
| For all other roles, the times you are needed will be dictated by the nature of the role |
| For Gallery Steward, Welcome Host & Retail roles - if you are able to volunteer for a double slot rather thansingle, please indicate which time slots you'd like to have adjacent to your normal slot |

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| Are there any restrictions that we need to be aware of? e.g do you need to leave promptly to catch a bus? |
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| Are you able to help at short notice? |  |
| If you are, how would you prefer to be contacted? |  |

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| **Skills & Interests (that you think would be useful to us e.g speaking another language, DIY, flower arranging etc)** |
| Skills: |
|  |
| Interests: |
|  |

Signature:

Date: