

EXETER DEAF ACADEMY FUNDRAISING EVENT VOLUNTEER APPLICATION FORM



Exeter Royal Academy for Deaf Education

50 Topsham Road
Exeter, Devon EX2 4NF

Registered Charity No 1124523

This form can be completed as a Word document. Email employment@exeterdeafacademy.ac.uk for a template.

Thank you for your interest in volunteering at one of Exeter Deaf Academy's fundraising events to help support the New Academy Appeal. Your support will help us to make these events successful and change young Deaf lives.

As a valued fundraising event volunteer you may be asked to help in a number of ways, including: distributing leaflets, collecting donations, marshalling, manning an information stand, registering participants or handing out refreshments.

This role is ideal for someone who likes to be part of a team, is happy to get stuck in and enjoys encouraging others.

Please complete your details below. A member of the fundraising team will then be in touch.

Full name:	
Address:	
Post Code:	
Home Telephone	
Mobile Telephone	
E-mail address:	
Gender:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of birth:	
Do you have any disabilities that we may need to take into account whilst you are volunteering at the event?	
YES/NO	
If YES, please provide details:	

Why do you wish to volunteer for the Deaf Academy as a fundraising event volunteer?	
Where did you see this role advertised?	
To comply with our safeguarding policy please indicate whether you have any unspent criminal convictions?	Yes/No
<ul style="list-style-type: none"> • I confirm the information give on this form is accurate • I understand that my fundraising volunteering tasks with the Deaf Academy (Charity No 1124523) may involve situations and information of a confidential nature. I agree to maintain confidentiality at all times and not to disclose sensitive information I come across during my role as a fundraising volunteer to anyone without the consent of the Deaf Academy. • I agree to attend any induction or event briefing sessions that will include important safeguarding information. <p>Name: _____ Date: _____</p> <p>Signature: _____</p>	
<p>Data Protection: All of the information collected in this application form is necessary and relevant to the performance of the fundraising event volunteer role. We will use the information provided by you on this form, and treat all personal information with the utmost confidentiality and in line with current data protection legislation.</p> <p>For more information on how we use the information you have provided, please see our privacy notice on our website www.newdeafacademy.org.uk</p>	
<p>Please return, marked for the attention of the Fundraising department: Email: fundraising@exeterdeafacademy.ac.uk Mail: Exeter Royal Academy for Deaf, 50 Topsham Road, Exeter EX2 4NF Telephone: 01392 267019</p>	

THANK YOU FOR YOUR INTEREST IN SUPPORTING EXETER DEAF ACADEMY.