

# Volunteer Application Form

Thank you for applying to volunteer for  
Weston Park Hospital Cancer Charity



## Your Details

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
Address: \_\_\_\_\_  
Town: \_\_\_\_\_ Postcode: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Email Address: \_\_\_\_\_

*We would prefer to contact you via email. If this is **NOT** your preferred method of contact please tick here*

Mobile No: \_\_\_\_\_ Home No: \_\_\_\_\_

## Emergency Contact Details

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Daytime Contact No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

## Volunteer Opportunities

Please tick which volunteer opportunities you would be interested in:

- Event Volunteer
- Collection Tin Volunteer / Driver
- Volunteer Event Promoter
- Shop Volunteer

For more details about these opportunities please visit [www.wphcc.org.uk/volunteers](http://www.wphcc.org.uk/volunteers).

## Additional Information

Your Availability (Please Tick):

Day	Morning	Afternoon
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

**Weston Park Hospital Cancer Charity**

Whitham Road, Sheffield, S10 2SJ

T: 0114 226 5370

[www.wphcc.org.uk](http://www.wphcc.org.uk)

Registered Charity No. 1039885



Please give brief details of your current / previous volunteer experience:

Do you have a special reason for wanting to support Weston Park Hospital Cancer Charity?

### References

Please provide details of two referees who you are happy for us to contact, either as a current or past employer (within the last 2 years) or as a personal character reference. For a personal character reference, we ask for it to be someone with standing in the community, such as a teacher, police officer, GP or someone you know who is employed in a supervisory or managerial role.

#### Referee one

Name:

Address:

Contact No:

Email:

Relationship:

#### Referee two

Name:

Address:

Contact No:

Email:

Relationship:

### Declaration

I confirm that the details I have given in this registration form are correct. In accordance with the 1998 Data Protection Act, I agree that Weston Park Hospital Cancer Charity may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form can be stored on both manual or computer files. It will be held securely and only accessed by authorised personnel.

**Signature:**

**Date:**

Please email your completed form to: [cancer.charity@sth.nhs.uk](mailto:cancer.charity@sth.nhs.uk), or send it by post to:

**Volunteer Application, Weston Park Hospital Cancer Charity, Whitham Road, Sheffield, S10 2SJ**

For any queries, please call the charity office on 0114 226 5370. **Thank you!**

**Weston Park Hospital Cancer Charity**

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