



## Volunteer Application Form

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### Personal Details

Name:					
Address:					
Telephone:					
Email:					
Gender:	Male		Female		
Age Group:	Under 18		18-25		26-40
	41-55		Over 55		

### Areas of interest and Availability

Please select the area you wish to volunteer in:			
Administrative (weekdays)		Sparkle (Saturdays)	
Performing Arts School (weekdays)		Theatre Company (weekdays)	
Bright Soul (Monday evenings)		Other	

#### When are you available for voluntary work?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

How long do you intend to volunteer for? *(Please note some positions have a minimum commitment)*

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Why do you want to volunteer with our organisation?

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What do you hope to gain from your experience with us?

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If you have volunteered before please tell us a little about the experience

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Do you have any particular skills or qualities that you could use in your voluntary work?

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Can you inform us of any experience relevant to the role you are applying for?

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### Emergency Contacts

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

Name	Relationship
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Home Phone		Mobile	
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**References**

Please supply us with the name of two referees (non-relatives)			
Name		Name	
Position		Position	
Place of work		Place of work	
Telephone		Telephone	
Email		Email	

**Additional Information**

Do you have any special needs you would like to share with us?

Is there any additional information you would like to bring to our attention?

**Declaration**

Have you ever been convicted of an offence in the Republic of Ireland or elsewhere?	
Yes	No

If you ticked yes, please provide details below

I declare that all the information I have provided is true.	
Signed	Date

Please return to: Danielle McDonnell, Blue Teapot Theatre Company, Munster Avenue, Galway or email completed form to [training@blueteapot.ie](mailto:training@blueteapot.ie)

**Note: Garda Vetting is a requirement for all roles within our organisation**