



Volunteer Application Form

Personal details (please use block capitals)

Title Full Name

Address
 Postcode: Borough of London:

Date of Birth Emergency Contact Name

Telephone Emergency Contact Telephone
(Including STD code)

E-mail

Please List Any Allergies:

GP Name

&
Telephone

Date of your last tetanus injection:

Please list any Social Care Agencies/Organisations (if any) involved in your health and well-being.

| Agency/Organisation | Contact Details | Do you give permission for the Farm to contact the agency/organisation? |
|---------------------|-----------------|---|
| | | |

Application information

Area(s) you would like to work in:
(Please tick as appropriate)

Farm Activities/ Animal Care Environment / Conservation Administration / Office

Gardening / Tree Nursery Fundraising Show Committee Education

Other, please specify

Please list any particular trades or special skills

Your availability

| | | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Mon | Tues | Weds | Thurs | Fri | Sat | Sun |
| am <input type="checkbox"/> | am <input type="checkbox"/> | am <input type="checkbox"/> | am <input type="checkbox"/> | am <input type="checkbox"/> | am <input type="checkbox"/> | am <input type="checkbox"/> |
| pm <input type="checkbox"/> | pm <input type="checkbox"/> | pm <input type="checkbox"/> | pm <input type="checkbox"/> | pm <input type="checkbox"/> | pm <input type="checkbox"/> | pm <input type="checkbox"/> |

Why are you interested and what do you wish to gain from volunteering at the Farm?

Please continue on a separate sheet if you wish

