

Volunteer Application Form

All information received in this form will be treated confidentially.

Name:			
Role Applied for:			
Address:			
Date of Birth:		National Insurance No (if applicable):	
Telephone No:		Mobile No:	
Previous work experience and relevant qualifications:			
Have you previously been involved in voluntary work? If yes, please give details:	Yes No		
Do you have any spare time hobbies, interests or specific skills that may be useful to the activities?			
Do you agree to abide by Inline Hockey Ireland Code of Conduct (a copy should be included with this form)?	Yes No		
Have you completed Safeguarding Awareness Training?	Yes No		
If yes Organised by:	When:		
Do you agree to undergo specific training on the role of the (position being appointed)	Yes No		
Have you ever been asked to leave a sporting organisation in the past? (if you have answered yes we will contact you in confidence)	Yes No		
Any other relevant information?			
Please supply the names of two responsible people whom we can contact and who from personal knowledge are willing to endorse your application. If you have had a previous involvement in a sports club one of these names should be that of an administrator/leader in your last club/place of involvement.			
Name: Address:	Name: Address:		
Telephone: Designation:	Telephone: Designation:		
Signed:	Dated:		