



Sussex North & Brighton Branch

Registered Charity No.206630

VOLUNTEER FORM

Name

Pronouns

For insurance purposes we would like to ask you the following:

Are you under 18? (tick here)

Are you over 85? (tick here)

The RSPCA wholeheartedly supports the principle of equal opportunities and opposes all forms of unfair discrimination.

The RSPCA is committed to safeguarding our vulnerable supporters. Please refer to your local branch or animal centre should you wish to obtain information about their Safeguarding Policy.

Address Postcode

Phone number(s)

Email Address

Occupation

If still in College/education, name of College and address of College

Days available to volunteer

Hours available

How do you plan on getting to us for your shift?

We are a 20 minute walk from the nearest Bus stop and 40 minute walk from the nearest train station

Do you drive?

YES

NO

Do you have up to date tetanus vaccination?

YES

Describe your Skills?

What animal experience do you have?

Do you have any animals at home?

You must be 16 or older to volunteer, please sign here to confirm that you are 16 or over.

Signature

.....

References

Please give at least ONE reference

Name:

.....

Address:

.....

.....

Phone number:

.....

Occupation:

.....

Name:

.....

Address:

.....

.....

Phone number:

.....

Occupation:

.....

Volunteer signature..... Date:.....

Parent/Guardian (Under 18s) signature..... Date:.....

Staff signature..... Date:.....

Medical Record

Medical Conditions? Are you on any medication?

Are you on Medication? Do you have allergies?

Emergency Contact

Name

Relationship

Any Information we need to pass on to emergency services in the event of an emergency that needs an ambulance?

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Please complete this form, sign and return to the Reptile staff

I have read, understood and will abide by the rules and information in the RSPCA Reptile induction leaflet.

Signature Date.....

Print name

If under 18 Years old, you will need to get a guardian/parent to sign below

Signature Date.....

Print name

In case of an accident or sudden illness whilst you are volunteering, we need to know who to contact. Please complete your emergency contact details below.

Contact 1

Name

Phone number Email

Additional phone number

Contact 2

Name

Phone number Email

Additional phone number

HOW WE USE YOUR INFORMATION

The RSPCA (registered charity number 219099) and other RSPCA branches (separately registered, volunteer run charities) use the personal data (as defined by the Data Protection Act 2018) you give us for the purpose of achieving its animal welfare objectives. This might involve specifically:

- keeping administrative records
- contacting you in the future about other volunteering opportunities

You don't have to give us your telephone number or email address, or provide information about your hobbies and interests for these purposes but if you do, we will only use them for contacting you in relation to your volunteering.

If your application is more suited to a volunteering opportunity within another RSPCA branch, a separately registered, volunteer-run charity, we may forward your details so that branch may contact you directly about that alternative position. If you agree to your information being shared between the RSPCA and RSPCA branches in this way, please tick this box

Should you wish to change your communication preference or find out more about how we use your personal data please contact your local branch (if you have consented to us sharing your data) for further details.

VOLUNTEER DECLARATIONS

ELIGIBILITY TO VOLUNTEER IN THE UK

By completing this form I confirm that I am eligible to volunteer in the UK and understand that I am applying for a non remunerated, voluntary role. If you are from outside the EU or European Economic Area we advise you refer to the UK Visas and Immigration website for information about your eligibility to volunteer in the UK.

www.gov.uk/government/organisations/uk-visas-and-immigration

PARENTAL CONSENT (IF APPLICABLE)

Please note: opportunities for anyone under 16 years of age are limited and some restrictions apply in relation to opportunities for under 18s.

- I confirm I am the parent/guardian of the person mentioned above and I consent to them volunteering with the RSPCA.

Parent or guardian signature if under 18

Signature of parent/guardian:

Name (BLOCK CAPITALS):

Contact telephone number:

We will only use your telephone number for the purpose of processing this application. It will not be used for marketing purposes or shared with any third party.

VOLUNTEER SIGNATURE

- I confirm that the information I have provided on this form is true and complete. I understand that any false information may result in the withdrawal of any offer of a voluntary role. I understand that I may be asked to produce evidence of identification, address and status in the UK when applicable.

Signature:

Date:

