

Garthdee Field Allotments Association Volunteer Application Form



Contact Details:

Full Name

Address

Email

Telephone

Would you like to receive an electronic copy of our newsletter?

Yes / No

Your Availability When do you want to volunteer?							
	Monday	Tuesday	Wed	Thurs	Friday	Saturday	Sunday
AM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much time do you want to give per month?			2 hours <input type="checkbox"/>	1 day <input type="checkbox"/>	1.5 days <input type="checkbox"/>	2 days <input type="checkbox"/>	2+ days <input type="checkbox"/>

What is your preferred form of communication? Email / Telephone

Do you have any health or support needs of which we ought to be aware? Yes / No

If yes, please provide brief details.

Declaration:

I understand that I undertake all activities on site at my own risk. I will not start an activity unless I consider it safe.

Please print name.....

Please sign.....

Please date.....

Please return this form to:

Norman Coutts
12 Kinkell Road
Aberdeen
AB15 8HN

Contact 07702127346 or gfaawebhelper@gmail.com

www.garthdeeatments.org