

## ***WSSBO : Application to Become a Volunteer***

### ***Personal Details***

**Surname:**

**Forenames:**

**Address:**

**County:**

**Postcode:**

**Daytime Tel:**

**Mobile:**

**Date of Birth:**

**Email:**

**Next of Kin name & Phone:**

**Visa Status:**

### ***Day/Time Availability***

***Day:***

***Time Available:***

***Monday:***

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***Tuesday:***

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***Wednesday:***

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***Thursday:***

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***Friday:***

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***Saturday:***

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***Sunday:***

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***Why do you want to volunteer:***

### ***Declaration***

Please sign this AFTER you have completed ALL parts of the application form.

I certify that to the best of my knowledge, all the information I have given is correct.

**Signed:**

**Dated:**

