



Date:

Avon

Our Bright Future

Name	<input type="text"/>	Email	<input type="text"/>
Which role are you interested in?		Volunteering / Youth Forum / Work Experience (please delete as appropriate)	

Supporting Information

Please tell us a bit about yourself and explain why you are interested in this role.
Continue on separate sheet if necessary.

Personal Information			
Name		Date of Birth	
Address			
Telephone		Email	
Emergency Contact			
Name		Telephone	
Relationship to you			
Additional Information			
Please tell us about any medical conditions or allergies that you think we should be aware of.			
Please tell us about any access or support needs that you think we should be aware of.			
Declaration			
<ul style="list-style-type: none"> The information provided on this form is correct, to the best of my knowledge, and I will inform Avon Wildlife Trust of any changes. I agree to my information being used by Avon Wildlife Trust and its contractors and partners to plan, deliver and evaluate its programmes. I understand that Avon Wildlife Trust staff will take all reasonable steps to ensure their duty of care to children and young people under their supervision. I agree to Avon Wildlife Trust giving permission for emergency medical or dental treatment as considered necessary by medical professionals. <p><i>Avon Wildlife Trust will never sell your contact details to another organisation and never share your data with other charities for marketing purposes. Your personal details will only be used by Avon Wildlife Trust, and contracted organisations working on our behalf, or in partnership with us. To view our Privacy Policy, please visit www.avonwildlifetrust.org.uk/privacy-policy.</i></p>			
Signed		Date	
Parent or guardian (if under 18)			
I give permission for my child (named above) to participate in Avon Wildlife Trust activities and agree to the terms of the above declaration.		Name	
		Relationship to young person	
Signed		Date	