

Ribble Steam Railway Volunteer Application Form

Post /Role Applied for		
• •	DI .	
Title	Mr Mrs Miss Ms Other Specify	
Surname	First Name	
Date of Birth	h	
Address	Post	code
Full Daytime Phone No	Full Evening Phone No	
Email		
Emergency Contact	Relationship	
Emergency C	Contact No	
Any health co	conditions that you feel we should be aware of?	
How did you	ı hear about us?	
Describe you	ur skills, experience and qualifications that will make you a	good volunteer.

I am also interested in helping out with following areas: (circle or indicate <u>all</u> that are relevant)

café	museum	events and marketing	research	the engineering workshop	other, please tell us here
shop	admin and office help	railway operation	workshops for children and families	special events e.g. Christmas Santa Trains, Gala weekends	

I feel I am good at: (circle or indicate <u>all</u> that are relevant, please use the box below to tell us something extra that we may want to know about you. e.g. I used to teach, my child is has special needs etc.)

working with all ages of people	working with older people	working with special needs	working with young families	working with school age children	guiding groups around
other please tell	us here-				

Please tell us about any criminal conviction you have that is not spent under the Rehabilitation of Offenders Act 1974. This is unlikely to affect your capacity to volunteer.

Date:	Conviction:

What motivates you to volunteer with our charity? (circle or indicate all that are relevant)

to build new skills	to stay active	to improve my confidence	research	to get involved with the community	my interest in trains
my interest in Museums	a route to employment	to meet new friends	it will give my life routine	therapeutic value	other, please tell us

Do you have difficulties with: (circle or indicate <u>all</u> that are relevant) The following information will help us ensure that the activities you get involved with will not put you at risk, and that we best consider your needs.

lifting and carrying	operating technology	walking long distances	hearing	following verbal instructions	sight	controlled use of hand tools
If yes, for any o	f the above please	e give us more de	tails.			





Please indicate when you will be available to volunteer (circle or indicate <u>all</u> that are relevant)

Your commitment to supporting us at least 2 days or 4 half days per month is desirable and helpful to all our volunteers.

AM	10am- 2pm	PM	lpm- 5pm
0	Mondays (public	0	Mondays (public
	holidays only)		holidays only)
0	Wednesdays	0	Wednesdays
0	Good Friday	0	Good Friday
0	Saturdays	0	Saturdays
0	Sundays	0	Sundays

We are open weekends and public holidays April – October, and Wednesdays in August. Volunteers work to a mutually agreed rota. We open at other times for schools and group visits. There may be openings for suitable volunteers to assist at other times with behind-the-scenes activities in the museum, such as collection

care and documentation of our collections.

Would you be happy to w	ork on special events such as San	ta Specials in December? (please tick)
Yes	No Maybe	
Your Consent (please tick	k)	
I have parental co		nsent for photographs of myself ed in publicity.
References		
Please give the names and addresses of your two referees		
	Phone No	Phone No
	E-mail	E-mail
	Occupation	Occupation
I prefer to be contacted	d by (please tick)	
telephone	e-mail text	
I confirm that, to the b form is correct.	est of my knowledge, the inform	ation I have given on this
Signature	Date	

Please <u>email</u> your completed application form to enquiries@ribblesteam.org.uk with "<u>volunteer</u> posts" in the subject line, or post to:

Dave Watkins, Ribble Steam Railway, Chain Caul Road, Riversway Docklands, Preston, PR2 2PD. Tel 01772 728800 www.ribblesteam.org.uk