

DULWICH PICTURE GALLERY

Volunteer registration form

This form can be completed online, in person or in email. Please let us know if you need any support by emailing volunteering@dulwichpicturegallery.org.uk

First Name:	Surname:
Home Address:	
Telephone No: (Day)	Telephone No: (Evening):
Email Address:	

Which role are you interested in?

Do you have any concerns about volunteering or any specific access/support issues we might be able to help with?

What would you like to achieve through your voluntary work at Dulwich Picture Gallery?

Please describe the skills and/or experience that show your suitability for the role (as outlined in the role description).

When are you available? (Hours/days)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

How did you hear about volunteering at Dulwich Picture Gallery?

References

Please supply the names and addresses of two referees who know you well. This may be a previous or current employer, neighbour, head teacher or a previous volunteering project. Please note that a referee cannot be a relative.

Name	Relationship to referee	Position	Address	Telephone number	Email

Emergency Contact Details

Emergency Contact	Relationship	Address	Postcode	Telephone number	Mobile number

Agreement

Please sign to confirm that the details contained in this form are a true reflection of the discussion.

Signed by Volunteer Coordinator:	Date:
Signed by Volunteer :	Date:

Through filling out this form you are giving us your personal information which we will store. All the personal information we hold is held securely and restricted to those who need to use it. We will delete sensitive information when we no longer need it. For further information please see our Privacy Policy on our website.