Date:

STUDIO 40 VOLUNTEER REGISTRATION FORM

If you would like to consider volunteering at Studio 40, please fill in this form. If you would like to know more about volunteering opportunities at Studio 40, please phone 01639 631081. All information will be treated as strictly confidential.

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I would like to consider volunteering at Studio 40.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am interested in training to be a volunteer at Studio 40 because:

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I can commit to half a day (3½ hours) per month

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I can commit to more than half a day per month

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Studio 40 is committed to Equal Opportunities. If you require any special arrangements to be made for you to volunteer, please let us know here:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You do not need any qualifications to be able to volunteer but if you would like to tell us about any skills that you do have, please list them here:

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Where did you hear about volunteering opportunities at Studio 40?

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| --- |
| OFFICE USEDate received:Constituent ID: |

**Thank you for your interest**

Please return this form to:

Alice Jones, Volunteer Co-Ordinator.

Studio40neath@gmail.com

Studio 40, 40 Queen Street, Neath SA11 1DL