



## Volunteer Application Information

**\*Please circle, or delete as appropriate**

Name:	Preferred method of contact: <b>Phone / email*</b>
Address:	
Phone:	
Email:	
Date of Birth:	

Why would you like to volunteer for Just Festival?

Please outline any experience you may have of working with the public or what makes you suitable for this role: (NB. This is not a requirement as training will be provided)

**Day Events - Please mark 'X' in the box for your available days and times.**

Day / Half Day	Mon	Tues	Wed	Thu	Fri	Sat	<u>STATE WHAT DATES FROM 5<sup>th</sup> - 26<sup>th</sup> Aug</u>
10:00-17:15							
10:00-13:15							
13:15-17:15							

**Evening Events – please mark 'X' next to the event that you are available for:**

Fri 4 <sup>th</sup> Aug: 16:15 – 18:15 – Launch	
Sun 6 <sup>th</sup> Aug: 20:15 – 22:15 – Concert	
Mon 7 <sup>th</sup> Aug: 17:15 – 19:15 – Concert	
Wed 9 <sup>th</sup> Aug: 17:15 – 19:15 – Concert	
Fri 11 <sup>th</sup> Aug: 17:15 – 21:15 – Talk and Dance Performance	
Sat 12 <sup>th</sup> Aug: 19:15 – 21:15 – Dance Performance	
Mon 13 <sup>th</sup> Aug: 20:15 – 22:15 – Concert	
Tue 14 <sup>th</sup> Aug: 19:15 – 21:15 – Dance Performance	
Wed 15 <sup>th</sup> Aug: 19:15 – 21:15 – Dance Performance	
Thu 17 <sup>th</sup> Aug: 17:30 – 19:45 – Talk	
Fri 18 <sup>th</sup> Aug: 19:15 – 21:15 – Dance Performance	
Sat 19 <sup>th</sup> Aug: 19:15 – 21:15 – Dance Performance	
Sun 20 <sup>th</sup> Aug: 20:15 – 22:15 – Concert	
Sat 26 <sup>th</sup> Aug: 18:00 – 21:15 - Finale Concert	

Are you a student?: **YES / NO**

Are you working?: **YES / NO**

If so what is your role?:

**Health and Safety**

Do you have a disability or a health condition that you would like us to take into account? (If yes, please give details below) **Yes / No\***

Please provide us with an emergency contact name and number\* for someone we can get in touch with in case of an unlikely emergency when you are on-site at the organisation.

Name: ..... Relationship: ..... Number:.....

**\*This will be treated confidentially, and will be stored securely, and the emergency contact will only be contacted for that purpose.**

Please tell us how you found out about Just Festival Volunteering (i.e. via which organization, website, word of mouth etc.)

**CONSENT and AGREEMENT**

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I confirm that:

- the information I have given above is correct.
- I give permission for this form to be passed on to the organisation.
- I am able to commit my time to this project as stated above.

**Name:** ..... **Date:** .....

***Thank you for filling out this application. Please return by email to Mark Taylor Operations Coordinator [mark@just-festival.org](mailto:mark@just-festival.org)***