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**Glow In The Park 2017**

**Contact Form**

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| **Full Name** |  |
| **Contact number and email address** |  |
| **How did you hear about Chain of Hope?** |  |
| **Previous event experience** |  |
| **Dietary requirements** |  |
| **Home address** |  |
| **Emergency contact details** | Name:  Number:  Address: |
| **Disclaimer** | As a Chain of Hope Volunteer you are expected to work reliably and remain professional, adhering to all given procedures and health and safety guidelines and behaving in an appropriate manner whilst representing the charity.  Whilst volunteering at the event, you may be required to handle cash donations and potentially gain access to confidential information from our donors. This information must not be disclosed to any other person unless in pursuit of your duties and/or with specific permission given by a person on behalf of Chain of Hope. Any donations you receive on the night must be passed on to a member of Chain of Hope staff as soon as possible after receiving. This condition applies during your relationship with Chain of Hope and after the relationship ceases.  In the event that you can no longer volunteer at Glow In The Park on Saturday 30th September 2017 we require at least 48 hours advance warning.  I fully accept above conditions and I understand that Chain of Hope is not liable for any damage to my person or to others as a result of my participation in this event.  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name:  Date: |

