



**Volunteer Application Form**

Completed applications should be emailed to admin@allaboardwatersports.co.uk

or posted to

All Aboard Watersports, Baltic Wharf, Cumberland Road, Bristol, BS1 6XG

Please complete this form in BLOCK CAPITALS using Black or Blue Ink

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** |  | **First Name** |  |
| **Surname** |  | | |
| **Date of Birth** |  | | |

**Contact Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Address** |  | | |
| **Email Address** |  | | |
| **Home Telephone Number** |  | **Mobile Telephone Number** |  |

|  |
| --- |
| **Please give a summary of relevant qualifications, past experience and any voluntary or community work.** |
|  |

**Past Experience**

**Availability** (Please Indicate the times you are available to volunteer)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| **Morning** |  |  |  |  |  |  |
| **Afternoon** |  |  |  |  |  |  |
| **Evening** |  |  |  |  |  |  |

**Areas of Interest** (Please specify)

**Activity**

Sailing  Paddlesports  Rowing  Sailability  Rocking the Boat

**Location**

Baltic Wharf  Avon Quay  Chew Valley Lake

|  |  |
| --- | --- |
| **Boat Maintenance (Bosun)** | * Assist with maintenance work on boats, including winter clean ups * Keep boats in working order as far as possible * Carry out minor repairs to equipment as necessary * Maintain Bosun log book |
| **Reception Cover (including answering the phone)** | * Answer the phone * Deal with basic enquiries from the website and in person * Be the first point of contact for people walking into the centre * Welcome client groups and notify appropriate instructor * Will need to have basic computer skills including reading and replying to emails |
| **Premises Maintenance** | * Do basic maintenance work around the centre (e.g. changing light bulbs, minor repairs etc) * Help to keep the centre and grounds tidy * Clear the boat yard * Clean boats including powerboats * Keep boats empty of water * Completing safety checks |
| **On the water volunteer (Sport specific – please choose Sailing, Rowing or Canoeing/Kayaking)** | * Assist with preparation of equipment for sessions * Taking registers for groups * Assist groups with putting on appropriate equipment/clothing (e.g. waterproofs and buoyancy aids) * Assist groups getting on and off the water * Provide support in safety boats * Assist the instructor as required |
| **I.T Support** | * Give support to the office to maintain computer systems * Back up computers on a regular basis * Give support to solving I.T issues |
| **Publicity/Marketing (one or more of the following)** | * Creating and sending out a regular newsletter * Managing and updating our Facebook Page * Creating and designing marketing materials (posters) * Creating emails for mailing list |

**Roles of Interest** (Please specify)

**References**

Please give names and addresses of two persons to whom application for a reference may be made. At least one should have first-hand knowledge of your previous work. References from relatives will not be accepted.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Contact Number** |  |
| **Address** |  | **Capacity In which known to you** |  |
| **Email Address** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Contact Number** |  |
| **Address** |  | **Capacity In which known to you** |  |
| **Email Address** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **DECLARATION** | | | |
| Data Protection Act In order to recruit to this post *All-Aboard Watersports* will (within the terms of the Data Protection Act 1998) process personal information given in connection with this application. Information relating to the successful applicant will form part of personnel records. No other use will be made of information about applicants. | | | |
| Consent I consent to the processing of personal information in the way described.  Declaration I declare that to the best of my knowledge the information given on this form is correct and understand that misleading statements or deliberate omission may be sufficient grounds for cancelling any appointment arising from this application. | | | |
| **Signature** |  | **Date** |  |

**Equal Opportunities Questionnaire**

ALL-ABOARD WATER SPORTS is working to ensure that its workforce, including volunteers, reflects the diversity of the local population. We can only judge our success in this area if we have full information regarding the gender, ethnicity and disability of all prospective volunteers. The information will be kept confidential and used only for monitoring purposes.

**Gender**

FemaleMalePrefer not to say

**Disability**

Do you consider yourself to be a Disabled person?

Yes  No  Prefer not to say

**Age Group**

15 or under  50 – 64  Prefer not to say

16-24  65 – 74

25 – 49  75 and over

**Ethnic origin**

How would you describe your ethnic origin? Please tick against one category only.

White British  African Caribbean

White Irish  African Black

White Other  African Black British

Mixed, White/Black Caribbean  Black Other

Mixed, White/Black African  Chinese

Mixed White/Asian  Chinese Other

Mixed Other  Other Ethnic Group

Asian Indian  Prefer not to say

Asian Pakistani

Asian Bangladeshi

Asian or Asian British Other