Regional Volunteer Registration Form

Protecting and conserving War Memorial heritage.

Please fill in all sections. Please print clearly to ensure all information can be read and processed.

1.   Personal Details

Which County or Counties do you wish to be registered in as a Regional Volunteer (please put main county first)?	
Title:	
First name:	
Surname:	
Address:	
County:	
Postcode:	
Telephone No.:	
Fax Number:	
Email Address:	
Age (please tick one box):	☐ 18 – 30 years old ☐ 30 – 45 years old ☐ 45 – 65 years old ☐ Over 65 years old

Personal Statements

☐ Please tick here if you accept the following statement, *I agree that War Memorials Trust can make my details available to other Regional Volunteers.*

☐ Please tick here if you accept the following statement, I agree that War Memorials Trust can make my details available to other organisations, such as local councils, who request a local contact or assistance on War Memorial issues.

2. War Memorials Trust Details

War Memorials Trust Membership Number:	

It is a requirement of WMT insurance policy that Regional Volunteers are members in order to be covered while on official duties for the charity. This section should be blank only if you are submitting your membership application alongside a Registration Form.

3. General Information

Local Authority:	
Parish:	
Diocese:	
MP's Name:	
MSP/AM/Other local representatives who may be useful contacts:	

4. Role of War Memorials Trust Regional Volunteer

WMT want to ensure that Regional Volunteers are working in areas that interest them. In order to avoid asking individuals to undertake activities they would prefer not to get involved with the following chart should be completed which can be entered onto the WMT Regional Volunteers database.

Task	Very interested	Interested	Not interested
Monitoring the condition of War Memorials			
Reporting War Memorials at risk			
Assisting Local Projects			
Researching and Listing War Memorials			
Promoting WMT locally			
Registering as a WMT speaker			
Organising Events			
Representing WMT			
Working with other Regional Volunteers in my area			

How far would you be wiling to travel to undertake activities on behalf of War Memorials Trust?

Please tick the relevant box and fill in one of the options below. If you are unable to travel please tick that box, the reason for requesting this information is to prevent WMT staff asking Regional Volunteers to undertake activities further from their home than they feel is reasonable or realistic.

☐   Within my county of ……………………………….

☐   In the counties of ………………………………….

☐   ……………. number of miles from my home

☐   I am unable to travel

5. Skills and Experience

Please fill this in with as much, or as little, detail as is appropriate for you. This is a page where we can learn a bit more about our Regional Volunteers.

a) Please provide brief details of any offices held or memberships that would be relevant to the work of WMT

b) Please describe how you think you can contribute to WMT and what skills and experiences you could bring to the organisation (for example an interest in war memorials, photographic expertise/qualifications, employment history,)

War Memorials Trust Regional Volunteer Agreement

This agreement sets out the duties and responsibilities of a Regional Volunteer (the individual) and War Memorials Trust (the organisation).

1   Upon signing the Agreement individuals wishing to become Regional Volunteers agree:

- A)   To represent War Memorials Trust in an appropriate manner and work with the organisation to fulfil its aims and objectives as an unpaid Volunteer
- B)   To abide by the War Memorials Trust Regional Volunteers Agreement and Code of Conduct
- C)   To provide the organisation with 2 passport photographs to enable the organisation to supply an ID card

2 Upon Signing the Agreement War Memorials Trust agree:

- A)   To recognise the individual as a Regional Volunteer
- B)   To provide the individual with written evidence that they have been accepted as a Regional Volunteer and supply an ID card the individual can use when representing the charity
- C)   To provide reasonable assistance and support to the individual in carrying out activities on behalf of the organisation

Signed by Applicant:

Name of Applicant:

Date:

Signed by War Memorials Trust Member of Staff:

Name of War Memorials Trust Member of Staff:

Date:

Office Use:			
Valid membership	Yes/No	2 Passport photographs	Yes/No
Registration Form received	Yes/No	RV Pack sent to RV	Yes/No

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