

Registration Form for Organisations

(Note: if you are already registered with the Volunteer Centre go straight to page 2 to register your opportunity)

DETAILS OF THE ORGANISATION

Name: _____ *If registered, Charity No.:* _____

Address: _____

Town: _____ County: _____ Postal Code: _____

Geographical Area: *(i.e. where you are based)*

Tel.: _____ Fax: _____

Email: _____ Website: _____

Directions: *(i.e. how to get there)*

Contact: _____ Title: _____

First Name: _____ Surname: _____

Salutation: _____ Job Title: _____

Tel.: _____ Fax: _____

Email: _____ Website: _____

Mission Statement: *(i.e. purpose of your organisation or objectives)*

Activities of the Organisation: *(Please note this will be given out to prospective volunteers)*

Register Opportunity

Organisation Name: _____

Opportunity Title: _____

Address of the Opportunity: *(if same as head office, leave blank)* _____

Town: _____ County: _____ Postal Code: _____

Geographical Area of Opportunity: *(if same as head office, leave blank)*

Contact for this Opportunity: *(if same as head office, leave blank)* Title: _____

First Name: _____ Surname: _____

Salutation: _____ Job Title: _____

Tel.: _____ Fax: _____

Email: _____ Website: _____

Availability:
 Ongoing Yes / No: _____ *(If -No- please indicate)* Start Date: _____ End Date: _____

	Sat	Sun	Mon	Tue	Wed	Thurs	Fri
AM							
PM							
EVE							

Please tick appropriate boxes

Description of the Opportunity *(Please Note: This information will be given to prospective volunteers)*

Skills/Qualifications required

Directions: *(i.e. how to get there- if same as head office leave blank)*

Please categorise your opportunity:

Area of Benefit/Interest: Please tick appropriately		Type of Activity: Please tick appropriately	
<input type="checkbox"/>	Animals	<input type="checkbox"/>	Administration
<input type="checkbox"/>	Art and Culture	<input type="checkbox"/>	Advice Work and Counselling
<input type="checkbox"/>	Children and Youth	<input type="checkbox"/>	Architecture and Building Work
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Art
<input type="checkbox"/>	Disaster Relief	<input type="checkbox"/>	Befriending
<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>	Business and Management
<input type="checkbox"/>	Drugs and Addictions	<input type="checkbox"/>	Campaigning and Lobbying
<input type="checkbox"/>	Education and Literacy	<input type="checkbox"/>	Caring
<input type="checkbox"/>	Elderly	<input type="checkbox"/>	Community Work
<input type="checkbox"/>	Employment	<input type="checkbox"/>	Driving
<input type="checkbox"/>	Environment	<input type="checkbox"/>	Finance Work
<input type="checkbox"/>	Families	<input type="checkbox"/>	Fundraising
<input type="checkbox"/>	Gay, Lesbian, Bi and Transsexual	<input type="checkbox"/>	Hostel Work
<input type="checkbox"/>	Health and Hospital and Hospices	<input type="checkbox"/>	Languages
<input type="checkbox"/>	Heritage	<input type="checkbox"/>	Legal Work
<input type="checkbox"/>	Homelessness and Housing	<input type="checkbox"/>	Marketing and PR and Media
<input type="checkbox"/>	Human and Civil Rights	<input type="checkbox"/>	Practical Work and DIY
<input type="checkbox"/>	International Aid and Disaster Relief	<input type="checkbox"/>	Retail and Charity Shops
<input type="checkbox"/>	Legal Aid and Justice	<input type="checkbox"/>	Teaching and Training
<input type="checkbox"/>	Mental Health	<input type="checkbox"/>	
<input type="checkbox"/>	Museums	<input type="checkbox"/>	
<input type="checkbox"/>	Politics	<input type="checkbox"/>	
<input type="checkbox"/>	Prisoners and Ex-Offenders	<input type="checkbox"/>	
<input type="checkbox"/>	Race and Ethnicity and Refugees	<input type="checkbox"/>	
<input type="checkbox"/>	Religion	<input type="checkbox"/>	
<input type="checkbox"/>	Sport and Outdoor Activities	<input type="checkbox"/>	
<input type="checkbox"/>	Women's Groups	<input type="checkbox"/>	

Do any of these apply? Please tick appropriately		What Recruitment Process will you use for this opportunity: Please tick appropriately	
<input type="checkbox"/>	Cares Inc	<input type="checkbox"/>	Application Form
<input type="checkbox"/>	Community Service	<input type="checkbox"/>	Informal Discussion
<input type="checkbox"/>	Community Transport	<input type="checkbox"/>	Interviews
<input type="checkbox"/>	Help Service	<input type="checkbox"/>	Not Known
<input type="checkbox"/>	Millennium Volunteers	<input type="checkbox"/>	Other
<input type="checkbox"/>	Youth Volunteering	<input type="checkbox"/>	Police Check
<input type="checkbox"/>		<input type="checkbox"/>	References
<input type="checkbox"/>		<input type="checkbox"/>	Trial Period

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Arrangements:	Details:
Age/Gender Restrictions	
Disabled Access	
Equal Opportunities Policy	YES / NO
Expenses	
Induction	
Insurance Cover	YES / NO
Training	
<i>(Add new if necessary)</i>	

Do you want your opportunity to be promoted on the National Volunteer Database (www.Do-it.org.uk)? YES / NO

I confirm that the details are correct, and that I am happy for the Volunteer Centre Tameside to promote this opportunity on behalf of my organisation.

Name of Authorised Signatory

Authorised Signature

Please return this form to:

Volunteer Centre Tameside
 95/97 Penny Meadow
 Ashton Under Lyne
 Tameside
 OL6 6EP

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 Fax: 0161 343 7527
 E-Mail: sue@tamesidevb.org.uk