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| 1. **Volunteer Application**
 |  A couple of people holding hands  AI-generated content may be incorrect. **LOUGHBOROUGH TOWN OF SANCTUARY**  |

**Contact Information**

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| Post Code |  |
| Home Phone |  |
| Mobile Phone |  |
| E-Mail Address |  |

* 1. **Please tell us what interests you regarding volunteering with Loughborough Town 0f Sanctuary?**

**Anything else you want to tell us? (e.g. Please add languages, availability of transport, special skills or qualifications that you wish us to consider using, ideas for developing, health issues)**

**Character referees:**

1. **Name ………………………………………………………..Tel No ………………………………**
2. **Name ………………………………………………………..Tel No ………………………………**
	1. **By returning this form to us we assume that you understand and accept your responsibilities with regards to maintaining confidentiality, that you are also willing to attend induction and training sessions as required for any prospective role, that you agree that this information can be kept by LToS, and that you consent to receiving emails and other communications directly related to the work of LToS.**
	2.
	3. **Signed: ……………………………………………………………………………**
	4. **Date: …………………………**