

## Personal Details

First Name		Surname	
Address			
Postcode		Home Phone	
Date of Birth		Mobile Phone	
Email address			

## Emergency contact (in case of any accident or illness while you are at HFS)

Name		Phone number	
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**Do you have any support needs?** Please let us know about any illness, disability or condition that we need to be aware of or any arrangements we need to make to ensure you are safe and comfortable.

Do you have any history of back problems? Yes / No

**Availability** (please tick all the days you might be available to volunteer).  
Most people volunteer 9.30-4.00 on regular days but other arrangements are possible.

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

**What volunteering role would you like?** (please tick all that apply):

<input type="checkbox"/> Helping in the warehouse, arranging items and getting orders ready for delivery	<input type="checkbox"/> Helping on the vans and in the warehouse. Collecting and delivering to people as well as arranging goods in store and preparing orders.	<input type="checkbox"/> Helping customers in the store, answering the phone, dealing with enquiries, booking in collections.	<input type="checkbox"/> Helping to repair, restore and paint furniture in the workshop (experience and training required for this role)
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**What do you hope to achieve through volunteering?** (please tick all that apply):

<input type="checkbox"/> Something to do	<input type="checkbox"/> Make friends	<input type="checkbox"/> Learn new skills	<input type="checkbox"/> Better chance of getting work – looks good on CV
<input type="checkbox"/> Support the community	<input type="checkbox"/> Save things from waste	<input type="checkbox"/> Training courses	<input type="checkbox"/> Other

PTO for a few more questions

**What are your goals at the moment?**

**How can we help you achieve your goals?**

**Would you like to take training courses? If so, which ones?**

**Have you volunteered before? If so, where and what did you do? Did you like it?**

**Please provide us with contact details of someone who could provide you with a reference.**

Name-

Address-

Contact Number-

How do you know this person?

Please return to:

**HFS Hastings** 6-10 Dorset Place **Hastings** TN34 1LG  
**HFS Bexhill** 47 London Road **Bexhill** TN39 3JY