



## Families' Activity Breaks

# Volunteering Application Form

### OFFICE USE ONLY

Form ref:	
Date received:	

Service / Staff number:	Rank:
Forename:	Surname:
Unit Address:	
Postcode:	

## PERSONAL DETAILS

Military Telephone:		Civilian Telephone:	
Mobile:		Email:	
T-Shirt size:		Preferred name:	
Are you CRB checked?	CRB number:	CRB expiry date:	
Which camp are you volunteering for?	1st choice:	2nd choice:	
Would you be prepared to drive a minibus?			
Please detail driving licence details and categories:			

## BACKGROUND AND MILITARY EXPERIENCE

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**PLEASE GIVE REASONS WHY YOU WISH TO WORK WITH BEREAVED CHILDREN & FAMILIES**

**HAVE YOU EXPERIENCED ANY MAJOR LOSS?**

(e.g divorce, major illness, death of a colleague, relative or friend) Please describe and give dates.

**ANY RELEVANT TRAINING OR EXPERIENCE**

Signature:	Date:
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