

## **Volunteer Application Form**

Name (Block Letters)	Date of Birth
Residential Address	Phone (M)
	(H)
StatePostcode	(W)
Postal Address (if different)	Postcode
Email Address	
Do you have any medical condition of which we should be advised	d? (Please circle) Yes No
If "Yes", please specify	Medication
Next of Kin, in the event of injury	
Address	Postcode
Phone numbers (H)(M)	(W)
Do you have First Aid qualifications? (Please circle)	es No
If "Yes", please specify	
Do you have a current Working With Children (WWC) Check Clea	rance? (Please circle) Yes No
If "Yes", Check Number	Expiry
I wish to apply for a position as a volunteer with East Coast He	ritage Rail
I am particularly interested in working in/as (you may tick more than one position.)	
<ol> <li>Passenger Attendant</li> <li>Buffet &amp; On Board Service</li> <li>Carriage Maintenance</li> <li>Carriage Restoration</li> <li>Commercial, Legal Planning.</li> </ol>	
I have the following trade qualifications and/or experience	
I wish to be a volunteer with ECHR because	
I agree to abide by any reasonable condition placed upon my acce Heritage Rail (ECHR). I will obey instructions issued to me by any workshop, on the train or about any other premises used or occup	relevant body in relation to my duties in the pied by ECHR from time to time.
Signed	. Date