



SOUTH DERBYSHIRE
VOLUNTEER FORCE

South Derbyshire CVS

Unit G, Sharpes Industrial Estate 6 Alexandra Road

Swadlincote Derbyshire DE11 9AZ

Telephone: 01283 550163 or 07458 304315

Registered Charity No: 1101450 Company No: 4958843

South Derbyshire Volunteer Force –Organisation Registration Form



Please complete this form and email to volunteer@sdcvs.org.uk or post it to the Volunteer Force Team at the address above.

If you are unable to print the form please do contact us and we will be happy to post a copy to you or even complete the application over the telephone. If you are struggling to scan the form, to return it, you can take a photograph on a mobile device and email or SMS text it to +44 (0)7458 304315.

ORGANISATION DETAILS

Organisation Name:

Address:


Postcode:


Organisation Telephone Number:


Organisation Email:

Organisation Website:

Organisation Social Media Links:

Facebook 

Twitter 

Instagram 

What type of organisation are you?

This information is for our monitoring purposes and will help us to provide you with information and support that is relevant to your organisation.

Voluntary Organisation
 Statutory

Private
 Other (please state)

What's your organisations legal status?

Unincorporated Association Company Community Interest Company (CIC)
 Charitable Incorporated Organisation (CIO) Trust Industrial and Provident Society
 Not Applicable Unknown

Is your organisation a registered charity? if so please provide your charity number.

Are volunteers in your organisation covered by the following?

You must have insurance for your volunteers to advertise with us. **If you don't have insurance in place you can still register with us and we will provide advice on how to arrange insurance but you will not be able to advertise opportunities.**

Equal Opportunities Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Health and Safety Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No
Volunteer Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Child Protection Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No
Safeguarding Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Equality and Diversity Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No
Volunteer Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No		

We can advise and help you devise any policies you do not have.

Please describe the aims, purpose and activities of your organisation.

This information will be used to provide details about your organisation to prospective volunteers so please be as clear and concise as possible.

Will you take small groups for one off volunteering? Yes No

We occasionally receive requests from employers and other groups to do one-off team or individual volunteering days which can be great for your organisation.

CONTACT DETAILS

Please provide details of the person who would be your preferred first point of contact for us AND also indicate if we can pass your details on to prospective volunteers.

Name: Position/Role:

Email:

Contact Telephone Number:

Do you consent to us sharing your contact details with corporate organisations seeking volunteer partnerships or prospective volunteers? Yes No

DECLARATION

What will we do with the information you give us? We will hold your information confidentially and will keep your information safe in accordance with Data Protection and GDPR and only use it for purposes connected with promoting your organisation and volunteering opportunities. You may request a copy of the data we hold or its deletion at any point by emailing info@sdcv.org.uk.

Please tick here to consent to us holding your data for the purposes of supporting the recruitment of volunteers, accessing training opportunities, events and other SDCVS services.

Please tick here to consent to us sharing data via the National Volunteering Database (NVD) for the purposes of advertising volunteer roles and ultimately the recruiting of volunteers.

Please tick here to consent to us registering the details of the primary contact to receive periodic eBulletins and volunteering related updates from SDCVS.

I have read the information above and I confirm the details given are correct. I am authorised to sign this on behalf of my organisation.

Name:

Signature:

Date of Birth: / /

Opportunity details are registered with us on a separate form.