

# BEACH LIFE

## TEAM MEMBER APPLICATION FORM



**CONFIDENTIAL**

Please complete this form as fully as possible using **BLOCK CAPITALS**

### Personal Details

Title.....Full forenames..... Surname.....

Contact address.....

Postcode.....

Telephone no. day.....

Evening.....

Email.....

Mobile.....

Date of birth..... Age.....

Male / Female

If your address/surname has changed in the last year, please give previous postcode/surname

### Emergency Contact Details

(NB: This should NOT be someone who is there with you.)

Name..... Telephone no. day..... Evening.....

Relationship to you..... Mobile.....

Address (if different from above).....

### Church Information

Please give details of a church leader who knows you well. We may contact them for a reference.

Name of Church you attend.....Name of leader.....

Role of leader in church.....Telephone no.....

Email.....

## Health and Safety

Answering yes to any of these questions will not necessarily exclude you from re-appointment.  
Please comment as fully as you feel appropriate.

- Do you have any medical conditions or any allergies (e.g. hay fever, allergy to certain foods)? Yes  No  (give details)
- Are you currently receiving any medical treatment? Yes  No  (give details)
- Have you received treatment or counselling for depressive illness in the past year? Yes  No  (give details)
- Do you require a special diet? Yes  No  (give details)

## Preferred Areas of Service

- Age group            0-4            4-7            8-10            youth
- Other areas you would like to serve in    admin   catering   first aid   music   prayer team   craft prep
- Availability            Tuesday 27th            Wednesday 28th            Thursday 29th            Friday 30th
- Morning
- Afternoon
- Evening

## Data Protection Statement

We will hold your address details on file but will not release the information to any third party. Some further details may be shared with a team leader. An address list may be shared with team and young people at a particular event, unless you ask for this not to occur.

Do you give your consent to this? Yes  No

## Declaration

Do you have an up to date DBS check for working with children? Yes  No

- At the team training day on July 13th please can you bring your DBS check certificate to verify-

Do you have any current or spent criminal convictions, cautions, bindovers, reprimands or cases pending?  
Yes  No

If yes, please give details and continue on a separate piece of paper if necessary:-

- (i) I will seek to maintain the unity of the team with which I am working, being willing to put aside my denominational / church preferences and practices where necessary.
- (ii) I have completed all sections of the form accurately, to the best of my knowledge.

Signed..... Date.....

Any queries please contact: Constance Tyce 07919 883938

Thank you for taking the time to complete this update form.

Please return to [constancyce@btinternet.com](mailto:constancyce@btinternet.com)

3 Heath Road  
Sheringham  
NR26 8JH

**REMEMBER !**

Beach Life 2019 Team Training

Saturday 13th July &  
Sunday 25th August

Please let us know you are coming