

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 30th Aug Wednesday 31st Aug Thursday 1st Sept Friday 2nd Sept
- 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 constancetyce@btinternet.com

3 Heath Road, Sheringham, NR26 8JH
or
Lighthouse, 62 Cromer Road, Sheringham, NR26 8RT

REMEMBER !

Beach Life 2022 Team Training

Saturday 9th July

& Sunday 29th August

Please let us know you are coming