



**AUGUST 7th -12th**

## **VOLUNTEER APPLICATION FORM**

### **Your Details**

Full Name	
Street Address	
Post Code	
Preferred Tel No	
E-Mail Address	
Are you 18 years of age or over?	___ Yes ___ No

### **Team Roles**

Please rank in order (1-5) of preference what areas you are volunteering for and whether you have experience in these areas.\*

Role	(1-5)	Experience	
Welcome	___	___ Yes	___ No
Security & Camping	___	___ Yes	___ No
Venue & Prayer	___	___ Yes	___ No
Social Area	___	___ Yes	___ No
Crème Cafe	___	___ Yes	___ No

\* We'll endeavour to place you in one of your first three role preferences however this cannot be guaranteed.

### **Other Experience**

Are you currently involved in children's / youth work in an Elim church? \_\_\_ Yes \_\_\_ No

If yes, please give details:

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Are you currently involved in children's / youth work in another church / organisation? \_\_\_\_ Yes \_\_\_\_ No

If yes, please give details:

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Have you ever had an offer to work with children or young people declined? \_\_\_\_ Yes \_\_\_\_ No

If yes, please give details:

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### T-Shirt

If you are accepted as a volunteer please select which size t-shirt you would require:

Extra small \_\_\_\_  
Small \_\_\_\_

Medium \_\_\_\_  
Large \_\_\_\_

XX Large \_\_\_\_  
XXX Large \_\_\_\_

### Reference

Please give the name and contact details of your Senior Minister for a reference. If you are related to the Minister please provide another senior church leader's details.

Full Name	
Street Address	
Post Code	
Preferred Tel No	
E-Mail Address	

How long have you known him/her? Years \_\_\_\_ Months \_\_\_\_

### Person to Notify in Case of Emergency

Full Name	
Street Address	
Post Code	
Preferred Tel No	
E-Mail Address	

### Disclosure Check

If you are applying to work with children or young people the position will be subject to a Disclosure and Barring Service Disclosure.

Would you be agreeable to this Disclosure? \_\_\_\_ Yes \_\_\_\_ No

### Eligibility

Are you eligible to serve in the UK? \_\_\_\_ Yes \_\_\_\_ No

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I understand and agree to the conditions involving a Disclosure check.

Name (printed)	
Signature	
Date	

Thank you for completing this application form and for your interest in volunteering with us at Limitless Festival 2017.

### Complete and return the form to:

Limitless Festival 2017  
Events & Operations Leader  
Elim International Centre  
De Walden Road  
Malvern  
WR14 4DF