

Montgomeryshire Wildlife Trust

Volunteer Enrolment Form



Personal details

Title:

Surname:

First Name:

Date of Birth (if under 18):

Address:

Town:

Phone numbers

County:

Landline:

Post code:

Mobile:

Email Address (please print clearly):

Your volunteering interests

What kind of volunteering would you like to be involved in? **Please mark all that interest you.**
(For more details of these activities see the *Volunteering Opportunities information sheet*).

Reserve Management

- Roaming Reserve / Deri Woods work party
- Becoming a Reserve Warden

Education and Outreach

- Helping with family events and activities
- Giving talks to adults

Surveys

- One off surveys
- Long term monitoring

If you have interest or expertise in a particular species, please note it under Skills and Experience

Publicity and Fundraising

- Helping on MWT stall at markets, fairs etc.
- Producing posters and leaflets
- Distributing posters, magazines, leaflets
- Holding your own fundraising events

Computing

- Helping with social media
- Website editing
- Species data entry

Office Based Work

- Administrative and general office help
- Magazine packing (three times a year)

Cors Dyfi Reserve: Dyfi Osprey Project and 360 Observatory

- ◆ People Engagement (welcoming visitors to the Reserve)
- ◆ Learning: working with children and adults
- ◆ Reserve work parties
- ◆ Osprey egg watch (Apr-Jun: three shifts to cover 24 hours)

To enrol for these please use the Cors Dyfi Volunteer Registration Form; to find out more please contact the Volunteer Development Officer, Janine Pannett: janine@montwt.co.uk

Skills and experience

Please list any skills, knowledge and experience you can bring to the Trust **relevant to the areas of interest you have identified above.**

Please tell us of any qualifications you hold, or training you have undertaken **relevant to the work of the Trust** (e.g. protected species handling licence, teaching qualification)

Are you a member of Montgomeryshire Wildlife Trust? Yes No

Medical details and next of kin

Do you have any health problems, medication or allergies which we need to know about in order to help protect your health & safety while you are volunteering with us?

Please give details of at least one person whom we can contact in case of an emergency:

Name:

Name:

Phone number:

Phone number:

Relationship to you:

Relationship to you:

Declaration

I agree that MWT can use photographs taken of me while volunteering to promote the work of the Trust. Yes No

The information given on this form is true to the best of my knowledge.

Signed:

Date:

Tick here if you would like to receive a copy of MWT's Volunteering Opportunities sheet, which gives further details about all our volunteering

Please return the completed form by post to:

Volunteer Co-ordinator, Montgomeryshire Wildlife Trust, Park Lane House, High Street, Welshpool, Powys SY21 7JP
vols@montwt.co.uk

This information will be stored and used in accordance with the Data Protection Act and will not be passed to any third parties. A copy of the Montgomeryshire Wildlife Trust Data Protection Policy is available on request from the above address.