



BERMUDA BOXING FEDERATION

VOLUNTEER APPLICATION FORM

REGISTRATION		
APPLICANT INFORMATION		
Full Name:		<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth (D/M/Y):	Home #:	Cell #:
Email Address 1:	Email Address 2:	
Current Address:		
Parish:	Zip Code:	
EQUAL OPPORTUNITIES		
<p>Bermuda Boxing Federation (BBF) is committed to equal opportunities and all volunteer recruitment decisions will be based on merit, suitability for the role and experience. All volunteer recruitment decisions will not be influenced by race, color, nationality, religion, sex, marital status, family status, sexual orientation, disability, age or membership. BBF fully endorses a working environment free from discrimination and harassment.</p> <p>BBF are committed to standards of excellence in Child Protection practices. Where your volunteer role may have direct contact with children, you will be required to submit a Criminal Reference Check. In the meantime, please complete the question below.</p> <p>Have you ever been convicted of an offence in Bermuda or elsewhere?</p> <p>(This information will be treated with the upmost of confidentiality. Only members of the BBF Executive Team will have access to this information.)</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>		

If you ticked yes, please provide details below:

Four empty rows for providing details.

Your Skills and Interests

Have you ever done any volunteer work before? Yes No

If you answered yes, please tell us a little about the experience.

Four empty rows for describing volunteer experience.

Why do you want to volunteer now? What has motivated you to get in touch with us?

Four empty rows for explaining motivation.

Do you have any particular skills or qualities that you could use in your voluntary work?

Four empty rows for listing skills and qualities.

What kind of volunteer work interests you?

Four empty rows for describing interests.

When are you available for voluntary work? <input type="checkbox"/> Totally Flexible							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							
How long do you intend to volunteer for? (note that some opportunities demand a minimum time commitment.)							
How did you find out about volunteering with the BBF?							

For office use only	Notes
Volunteer Position _____	
Volunteer Interview _____	
References Collected _____	
Date Available to Start _____	