

Application form to join the Naturezones Young Directors' Scheme

Name	Address	Date of Birth
Telephone No.	Email address	
Parent or Carer	Telephone No.	Email address
Parent or carer's address if different	Emergency Contact name and telephone number	Any allergies or medication

Why do you want to be a Young Director?

What sort of work do you want to do? Please tick all that apply

- | | |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <p>Administration</p> <p>Social Media</p> <p>Gardening</p> <p>Environmental</p> | <p>Conservation</p> <p>Sales/Retail</p> <p>Fundraising</p> <p>Other</p> |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|

Date of Application

Where did you hear about The Young Directors' Scheme?

How much time per week can you volunteer?

On which days are you able to Volunteer?

I understand that

- I will not be allowed to volunteer for more than the legally permitted volunteer time per week and that Naturezones or any other organisation participating in this scheme will adhere to this. I further understand that I must adhere to all health and safety requirements.
- Naturezones will carry out a risk assessment to ensure a safe working environment.
- All Young Directors will need to attend a minimum of 2 hours classroom training on the roles of Directors/ Trustees for which he/she will receive a certificate of attendance.
- Wherever possible, Naturezones and their partner organisations will ensure the safety of the Young Directors

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

Please print your name here.....

