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**Volunteer Marshal Registration Form**

Thank you for your interest in becoming a Volunteer Marshal! Please complete the form below to register your interest.

**Personal Information**

|  |  |
| --- | --- |
| Full Name: |  |
| Address: |  |
| Postcode: |  |
| Phone Number: |  |
| Email Address: |  |
| Emergency Contact Name: |  |
| Emergency Contact Phone Number: |  |

**Availability**

Please indicate your availability (tick all that apply):

☐ Weekdays ☐ Weekends ☐ Mornings ☐ Afternoons ☐ Evenings

Are there any specific dates or events you are interested in? (Please see attached list of events)

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**Experience & Skills**

Do you have any previous experience as a marshal or event volunteer? (Not required, but helpful)

☐ Yes ☐ No

If yes, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you have any relevant skills or qualifications (e.g., first aid, crowd management, communication)?

**Additional Information**

Do you have any medical conditions or accessibility requirements we should be aware of?

☐ Yes ☐ No

If yes, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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T-shirt size (for uniform, if applicable): ☐ S ☐ M ☐ L ☐ XL ☐ XXL

**Declaration**

I confirm that the information provided is accurate, and I agree to abide by the guidelines set out for volunteer marshals. I understand that my role as a volunteer is unpaid and that I may be subject to necessary background checks, if required.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for signing up! We will be in touch soon.**