**Westmorland and Furness Libraries Summer Reading Challenge Volunteer Application Form**

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| Surname:  |  |
| Forename: |  |
| Date of Birth: |  |
| National Insurance Number (if you’re 16 and over): |  |
| Address: |  |
|  |
| Postcode: |  |  |  |  |
| Home phone:  |  |  |  Mobile: |  |
| Email address (if regularly checked): |  |
| Someone we can contact in an emergency |
| Surname:  |  | Forename: |  |
| Relationship to you:  |  |
| Daytime phone number:  |  | Mobile phone number: |  |

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|  | Why would you like to volunteer with Westmorland and Furness Libraries? |  |
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|  | Please give details of any current or previous voluntary work you have done |  |
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|  | What qualities do you think you could bring to Westmorland and Furness Libraries? |  |
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| Would you like to help run activities for children? | **[ ]**  | Yes | **[ ]**  | No |
| Training: Can you commit to coming into the library before the Summer Reading Challenge |
| starts in mid-July? | [ ]  | Yes | [ ]  | No |
| Please list below any days / dates / times that you are unable to volunteer due to holidays and personal commitments. |
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| Westmorland and Furness Libraries may hold your contact details for consultation and possible focus group work. Westmorland and Furness Libraries also require consent for your contact details and information to be securely stored with Westmorland and Furness Libraries for use in statistical monitoring to be shared with our partners in Westmorland and Furness Council. |
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| I GIVE CONSENT FOR STATISTICAL INFORMATION TO BE SHARED 󠄀 󠄀**I GIVE CONSENT FOR MY DETAILS TO BE STORED FOR A MAXIMUM PERIOD OF TWO YEARS**  |  |  |  |  |

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| --- | --- |
| * Westmorland and Furness Libraries holds information on volunteers electronically. Information is treated with care and respect and is never given to other organisations without your consent.
* On completion, please hand in the application form to your local library.
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| * You will be contacted shortly to arrange a convenient time to meet for an informal discussion.
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| Your signature: |  |  Date: |  |  |
| Parent/Guardian signature: |  |  Date:  |   |  |
|  |  |  |

**Closing date: Friday 27th June 2025**