LARGE EVENT - VOLUNTEER REGISTRATION / ATTENDANCE

GROUP PROJECTS

This form may be used for large groups of volunteers taking part on single day or shorter activities. The original copy of this form must be retained with the project report and risk assessment for the activity. If more than one form is used (for instance, if more than one person is registering volunteers) the form should be numbered under 'project details' below as form number X of Y, e.g. 1 of 3.

PROJECT DETAILS

| Group Name: | Date: | / | / |
|-------------------------|--------------|---|----|
| | | | |
| Project Location: | | | |
| Project Leader/Manager: | Form Number: | C | of |

All volunteers should be aware of the following Conditions of Participation before signing the form. This can be done either by presenting the Conditions to the group as part of the initial project briefing, or by asking individuals to read the Conditions before signing overleaf.

If a volunteer declares any relevant medical conditions and/or pre-existing injuries, you must complete a standard Volunteer Registration Form.

CONDITIONS OF PARTICIPATION

I agree to comply with the following terms that refer to my participation in all projects and activities:

- 1) I have notified the Project Manager of any relevant medical conditions and pre-existing injuries, and I consent to the Project Manager rendering or authorising such medical treatment as necessary and accept responsibility for all associated expenses.
- 2) I am a volunteer and not an employee of the Committee.
- 3) I will not smoke, consume or store alcohol or illicit drugs while working on a project site.
- 4) I shall respect the rights, feelings and property of all others associated with projects.
- 5) I shall cooperate with the Project Manager to ensure a safe, happy and hygienic team environment.
- 6) My placement on all projects is at the discretion of the Project Manager.
- 7) Photographs or videos taken of me on a project may be used by the Committee for promotional purposes.

I understand that failure to comply with any of these conditions may result in the Project Manager requesting me to leave.



| Volunteer's Full Name | I understand and accept Conditions of Participation (Initial here) | I confirm I have notified the project manager of any relevant medical conditions or pre-existing injuries (Initial here) | Signature | Please provide your email or phone details if you would like further information about our Group |
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