



South Holland

Membership Application Form

Completed by.....(initials)

Date

Surname **First Name**

Tel. No (home) Tel. No (work)

Tel. No (mobile) Email

D.O.B.....

Address

.....

.....

Emergency Contact – Name/Tel No

Doctor – Name/Tel No

COMMENTS: Please inform us of any mobility, physical or mental health issues you have. Please note all information given is strictly confidential.

.....

.....

Police CheckedY/N Willing to be Police Checked....Y/N Military connections.. Y/N
 (for working with children) (for working with children) (British Legion)

Have you in the past, or are you currently doing other volunteer work? Y/N
 If yes, where ?

Why do you want to join the Time Bank? (tick all that apply)

Do something in your community ? Get practical help Meet people Learn something new

Other.....

Availability

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							
Flexible							

1st Person

2nd Person

Name/Address.....

Name/Address.....

.....

.....

.....

.....

Tel No.....

Tel No.....

Please can you provide two names, addresses and telephone numbers of people who know you ie a member of the family, a friend, a colleague. This is so we know that as a Time Bank participant you and your family are safe so for everyone involved in the scheme.

Participants Signature **Date**

Signature of Parent or Guardian (if under 18).....

This information will be stored on the Time Bank database for the exclusive use of the Time Bank.

Time Bank “ground rules”:

As a participant of Time Bank I agree to:

1. Respect another participant’s privacy or confidentiality
2. Respect other participant’s viewpoints, and to not pressure another participant to accept my religious beliefs or political views.
3. Not involve my friends or relatives in time bank activities by bringing them to a participant’s home or venue of time exchange, unless agreed with the Time Bank as being part of a group activity.
4. Not ask for or accept money, gifts or tips from other participants.
5. Not eat or drink a participant’s food and drink, unless invited to do so.
6. A no smoking policy in a participant’s home or venue of time exchange.
7. Not use any possessions of the participant, including the telephone, unless given clear permission to.
8. Always treat other participants respectfully.
9. Not exchange hours unless the time bank are aware (otherwise forfeit insurance cover).

The Time Bank will maintain a photographic record of the activities undertaken by participants. These may be used in our newsletter and for general publicity, including the Time Banks UK website. I give my permission for photos to be used for the Time Bank publicity.

Yes No

I agree to abide to the above ground rules

..... **Signed**

..... **Full name in capital letters**

All Time Bank members will be bound by our policies and procedures.

Contact SHARE Timebanking on 01775 725059 or sharespalding@timbanking.org

Name

Tick	ATTRIBUTES	
	Smoker	Habits
	Smoke tolerant	Habits
	Smoke intolerant	Habits
	Dog tolerant	Habits
	Dog intolerant	Habits
	Cat allergies	Habits
	Female	Gender
	Male	Gender
	White - British	Ethnicity
	White - Irish	Ethnicity
	Any other white background	Ethnicity
	Arabic	Ethnicity
	Bangali	Ethnicity
	Cantonese	Ethnicity
	Farsi	
	French	
	Greek	
	Gujerait	
	Hindu	
	Italian	
	Polish	
	Punjabi	
	Somali	
	Spanish	
	Turkish	
	Ukrainian	
	Urdu	
	Vietnamese	
	Other - please specify	
	Driver	Status
	Lives with family	Living Group
	Lives with others	Living Group
	Lives with partner or spouse	Living Group
	Lives alone	Living Group
	House	Housing
	Hostel	Housing
	Flat	Housing
	Bungalow	Housing
	Lift	Housing
	No lift	Housing
	Sheltered accommodation	Housing
	Residential accommodation	Housing
	Needs wheelchair	Mobility
	Needs walker / walking stick / crutches	Mobility
	Cannot manage stairs	Mobility