**folk_festival_logoStonehaven Folk Festival Volunteer Application**

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| **Name:** |  | |
| **Address:** |  | |
|  | **Post Code:** |  |
| **Email address:** |  | |
| **Mobile Phone No.** |  | |
| **Landline:** |  | |
| **Skills/Abilities:** |  | |
| **Are there any particular parts of the Festival organisation you are interested in?**  (For example, would you want to part of the organisation of the festival throughout the year, are you only available to help out over the weekend of the festival, are you able to help with the setting up in the week leading up to the Festival, are you available to help with the clear up after the Festival) | | |
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| **Do you have any physical disabilities or illnesses that we should be aware of? Yes/No**  If yes can you provide us with brief details. (You can leave this blank and discuss this face to face if you prefer.) | | |
|  | | |
| **Signed:** |  | |
| **Date:** |  | |

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| **Stonehaven Folk Festival will only use the information you provide for the purposes of discussing volunteering opportunities with the Festival. We may also email you with details of the forthcoming Festival and to ask your opinion on the Festival.**  **Is it OK for us to do this? Yes/No** |

Once completed please return the form to: **volunteer@stonehavenfolkfestival.co.uk**