



Moreton Men Sports Group CIC Volunteer Registration Pack

Season / Year: 2025–2026

SECTION 1 – VOLUNTEER DETAILS

Full Name:

Date of Birth:

Address:

Postcode:

Phone Number:

Email Address:

Role Applying For (tick or specify):

- Coach
- Assistant Coach
- Team Support
- Welfare Support
- Admin Support
- Matchday Volunteer
- Management
- Board

Other: _____

SECTION 2 – EMERGENCY CONTACT DETAILS

Emergency Contact Name:

Relationship to Volunteer:

Emergency Contact Number:

SECTION 3 – RELEVANT EXPERIENCE & QUALIFICATIONS

Please list any relevant experience:

Coaching Qualifications (if applicable):

First Aid Qualification:

Yes No

If yes, expiry date:

Safeguarding Training Completed:

Yes No

If yes, expiry date:

SECTION 4 – DBS / SAFEGUARDING DECLARATION

If the role involves working with vulnerable adults or under 18s:

I understand a DBS check may be required.

I agree to comply with safeguarding policies.

Signature:

Date:

SECTION 5 – CODE OF CONDUCT AGREEMENT

As a volunteer of Moreton Men Sports Group CIC, I agree to:

- Promote equality, inclusion, and respect
- Lead by positive example
- Maintain confidentiality

- Follow safeguarding procedures
- Avoid discriminatory or abusive behaviour
- Represent the organisation professionally
- I understand breaches may result in removal from my role.
- Volunteer

Signature:

Date:

SECTION 6 – DATA PROTECTION & PRIVACY CONSENT

Moreton Men Sports Group CIC processes volunteer data in line with UK GDPR and the Data Protection Act 2018.

We collect data for:

- Role administration
- Safeguarding compliance
- Emergency contact purposes
- Insurance and governance requirements
- Data is stored securely and accessed only by authorised directors.

I confirm I have read and understood the Privacy Notice.

I consent to my data being processed for volunteer purposes.

Signature:

Date:

SECTION 7 – MEDIA CONSENT

I give permission for photographs/videos to be used for promotional purposes.

I do not give permission.

Signature:

Date:

SECTION 8 – CONFIDENTIALITY DECLARATION

I understand that as a volunteer I may have access to sensitive information. I agree not to disclose confidential information outside of authorised organisational use.

Signature:

Date:

FOR OFFICE USE ONLY

Application Reviewed By:

Role Approved: Yes No

Director Name:

Director Signature:

Approval Date: