



## **Forever Angels Volunteer 'Essential Information' Form**

### **Personal Information**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email Address \_\_\_\_\_ Nationality \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Passport Number \_\_\_\_\_ Expiry \_\_\_\_\_

Visa Number \_\_\_\_\_ Valid Until \_\_\_\_\_

Date of Arrival at Forever Angels \_\_\_\_\_ Departure Date \_\_\_\_\_

### **Next of Kin Details**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

In the event of a medical or situational emergency – we will contact your next of kin above. If you are unable to make your own medical decisions, Forever Angels will act on your behalf after communication with your next of kind, where possible.

Please sign to agree to this. \_\_\_\_\_

### **Insurance / Medical Details**

Name of Insurer \_\_\_\_\_ Email Address \_\_\_\_\_

Policy Number \_\_\_\_\_ Phone Number \_\_\_\_\_

Blood Group \_\_\_\_\_ Allergies \_\_\_\_\_

## **Volunteer Disclaimer: I agree to adhere to the following:**

Please read and tick each statement if you agree...

I have already paid / I will pay a non-refundable deposit of £500 which will cover my first months rent in the volunteer house, utilities and lunches at the Baby Home.

I have already paid / I will pay a further £300 for the second month and £200 for my third months stay, and £100 per month thereafter, within 2 weeks of arriving at Forever Angels (if applicable.)

I have adequate Travel / Medical Insurance to cover me whilst volunteering at Forever Angels Baby Home which will cover me for emergency evacuation and repatriation of my remains should this prove necessary.

My passport has at least 6 months validity and it is my responsibility to have a valid visa in order to volunteer at Forever Angels. If I am refused entry or exit, to or from Tanzania, any additional costs incurred will be my responsibility.

I do not suffer from any alcohol, drug or self harming dependency, or any chronic condition which might become apparent during my stay at Forever Angels.

I consider volunteering at the Baby Home as seriously as any paid employment and to that end I will always be diligent and turn up for work promptly, and not under the influence of any alcohol or drugs.

I do not have any criminal convictions of violent / child abusive behaviour and I have attached a copy of my CRB Check to this disclaimer / I have already emailed my CRB Check to the Managers.

I understand that Forever Angels shall not be liable for any changes to accommodation or cancellation of the Volunteer Placement which is beyond their control.

I agree to volunteer fully at my own risk. I understand that Forever Angels shall not accept liability for any loss, damage or injury to any property, other person or my own personal being and Forever Angels are not in any way responsible for any illness, accidents or events during the Volunteer Placement which may result in injury, loss or fatality to me.

Forever Angels houses you on a safe and secure compound but it does not accept any responsibility for your safety or security of Volunteers. You are responsible for keeping yourself and your belongings safe and secure.

I respect the confidentiality of the information I gain whilst volunteering at Forever Angels and understand that some of these children have been removed from their home and are 'high risk'. **I agree not to publish reports, information or photographs without explicit written permission from the Forever Angels Managers.**

I agree to uphold the highest standards of professional and ethical behaviours at all times. I will adhere to Forever Angels guidance on appropriate cultural behaviour and dress during my time at Forever Angels and I understand that failure to do so may lead me to having my Volunteer Placement at Forever Angels terminated.

I confirm that my general state of health and fitness is good and I take full responsibility for my health and wellbeing whilst at Forever Angels. I have completed the Medical Questionnaire and given it to the Managers and I have complied with my Doctors medical advice about necessary vaccinations and malaria prophylaxis.

I have read and understand the Volunteer Information Pack at the House and the Guidelines on the Website and I will comply with them.

Signed \_\_\_\_\_ Date \_\_\_\_\_