



# Lostock Gralam Parish Council Volunteer Consent Form

Your name: .....

Address: .....

Postcode: .....

DOB: .....

Contact Number: .....

Email: .....

**Consent** By signing this form you consent to participate in any of the volunteer activities authorised in the Lostock Gralam Parish Council Volunteer Policy. You further agree to abide by the terms of the policy and follow any instructions and safety briefings provided by the Parish Clerk or activity contacts.

You further agree to seek any medical advice before undertaking any activities you feel will be physically demanding for you.

In return, we will provide any necessary equipment required to perform the task and insurance.

Please tick this box to confirm you have read and understood these requirements.

**Your information**

Lostock Gralam Parish Council will store the information you have provided in order for you to carry out your role as a volunteer.

All data will be stored securely and only shared with other organisations with your permission.

You have the right to view the data we hold about you, or request that some or all your data is deleted at any time.

Copies of our privacy notice policy are available on our website if you require further clarification.

If you are happy for Lostock Gralam Parish Council to keep a record of your information and contact details, please tick the box to give consent.

.....

Volunteer’s signature

Date .....

**Chosen Volunteer Role**

**Speed watch**

**Gardening/Open Flower Beds/Flower Planters**

**Litter (within the Parish Boundary) – Refer to CWAC**

**Playground Litter Collection**