



Organisation Registration Form(1)

Contact Details

Name of Organisation _____

Contact Name _____

Job Title _____

Address of organisation _____
 _____ Postcode _____

Geographical Area (*ie where you are based*) _____

Telephone _____ Mobile _____

E-Mail _____ Website _____

Travel Directions: _____

<p>Does your organisation . . .</p> <p><i>currently work with volunteers?</i> <input type="checkbox"/></p> <p><i>how many volunteers do you currently have?</i> <i>Age range</i></p>	<p><i>plan to work with volunteers?</i> <input type="checkbox"/></p>
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Is your organisation a . . . (Please ✓ the boxes that apply)

Registered Charity Public Sector Organisation Voluntary/Community Organisation

Other (Please specify) _____

Is your organisation registered with Having Volunteer Centre(HVC)? **YES** **NO**

Activities of the Organisation: *(Please note this information will be passed on to prospective volunteers)*

Mission Statement: *(i.e. purpose or objectives of your organisation)*

Could you support volunteers with special needs or disabilities? YES NO

Is the premises where volunteering will take place easily accessible YES NO

Organisational/Volunteer Support

Please indicate which of the following policies are in place at your organisation. Please note that the documents marked with an * are required when young people aged 16 to 18 are volunteers.

Please ✓ as appropriate

	Yes	No
Health & Safety Policy		
Equal Opportunities & Diversity Policy		
Child Protection Policy & Procedures*		
Public liability insurance that covers all volunteers in all their activities with you*		
Are there risk assessments available for the areas where the volunteer will be working?		
Volunteer Policy		
Volunteer Role Descriptions		

Please note:

Having Volunteer Centre can advise and provide model documents for you to use. If you do not have any of the above, this may prevent you from being able to register.

We would like to discuss the support we can offer to voluntary and community organisations,

Please place a 'tick' in the box and we will contact you.

Referring Volunteers

As part of our commitment to improve our services, we aim to contact volunteers and the organisations to which we have introduced them, to gain feedback from both parties to ensure the introduction was appropriate and everything is progressing as we would expect and whether we can provide any additional support.

Other Information

Please add any further information about volunteering in your organisation, or details of advice or support you may need in managing volunteers or any training needs.

Would you like someone from Havering Volunteer Centre to visit and/or talk to you in more detail and to see the work of your organisation? This will help us understand your organisation fully and enable us to promote your volunteering opportunities

YES I WOULD LIKE A VISIT NOT JUST NOW

Declaration

I confirm that the details on this form are accurate and reflect our current situation.

Signed:.....Name:.....Date:.....

Please complete an Opportunities Registration Form for every opportunity you would like to register with us and attach any promotional leaflets for your opportunities and organisation.

Thank You and I look forward to working with you further.

Return to: Havering Volunteer Centre
Email: volunteering@haveringvc.org.uk
www.haveringvc.org.uk

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Enhancing Volunteering in Havering

Registered Charity No. 1165759