The information you provide on this form will be used by us at ELY VOLUNTEER CENTRE to match your interests and availability with the current driving opportunities with the East Cambs Social Car Scheme.

**If you require help filling in this form please don’t hesitate to contact us, either by email at** [**angela@vcaec.org.uk**](mailto:angela@vcaec.org.uk) **or by telephone on 01353 666 556.**

|  |  |
| --- | --- |
| **Questions** | **Your Answers** |
| **About Yourself** | |
| **First Name** |  |
| **Surname** |  |
| **Date Of Birth** |  |
| **Email Address** |  |
| **Home Phone Number** |  |
| **Mobile Phone Number** |  |
| **Address Line 1** |  |
| **Address Line 2** |  |
| **City/Town** |  |
| **Postcode** |  |
| **Driving Licence No.** |  |
| **Expiry Date** |  |
| **NI Number** |  |

|  |  |
| --- | --- |
| **Enhanced DBS Check Required** |  |
| **Are You On The DBS Update Scheme** | **Yes / No** |
| **If Yes, Please Provide Details** |  |
| **Any Other Names Used** |  |
| **Dates From And To** |  |
| **Any Previous Addresses**  **(covering the last 5 years)** |  |

**When you have completed this Registration Form please return it to us either by email to** [**volunteers@vcaec.org.uk**](mailto:volunteers@vcaec.org.uk) **or by post/hand delivery to Ely Volunteer Centre, Centre E, 24 Barton Road, Ely, Cambridgeshire, CB7 4DE**

|  |  |
| --- | --- |
| **We Need Details Of Two Referees** |  |
| **Full Name** |  |
| **Relationship To You** |  |
| **Address** |  |
| **City/Town** |  |
| **Postcode** |  |
| **Email Address** |  |
| **Telephone Number** |  |
| **Full Name** |  |
| **Relationship To You** |  |
| **Address** |  |
| **City/Town** |  |
| **Postcode** |  |
| **Email Address** |  |
| **Telephone Number** |  |

|  |  |
| --- | --- |
| **Your Car Details** |  |
| **Registration Number** |  |
| **Manufacturer And Model** |  |
| **Colour** |  |
| **2 Or 4 Door** |  |
| **Saloon, Estate Or Hatchback** |  |
| **MOT Expiry Date (If Applicable)** |  |
| **Insurance Company** |  |
| **Policy Number** |  |
| **Renewal Date** |  |

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| --- |
| **The Following Will Also Be Required To Complete Your Application** |
| A Scanned Copy Of Your Passport |
| A Scanned Copy Of Your Driving Licence |
| A Head And Shoulders Photograph Of Yourself |