



ILMINSTER TOWN COUNCIL VOLUNTEER APPLICATION FORM

Please complete and return this form to the Town Council Office or email town.council@ilminster.gov.uk.

1. Personal Details

Name: _____

Address: _____

Postcode: _____

Phone: _____

Email: _____

2. About You

Why would you like to volunteer with Ilminster Town Council?

What skills, interests or experience would you bring to the role?

(Experience is helpful but *not required*.)

3. Availability

Please indicate your general availability:

- Weekdays
- Evenings
- Weekends
- Flexible

Any specific restrictions or preferences:

4. Volunteer Roles of Interest

Please tick any that apply:

- Open Spaces Support
- Ilminster Area Resilience Group (IARG)
- Christmas Lights
- Other (please specify): _____

5. Health, Safety & Support Needs

Do you have any medical conditions, accessibility needs or support requirements we should be aware of in order to keep you safe and supported?
(Information will be treated confidentially.)

- No Yes – please give details:

8. Data Protection & Declaration

Ilminster Town Council will keep your information securely and use it only for the purpose of administering volunteering roles.

I confirm that the information I have provided is accurate.

Signature: _____

Date: _____