

Working Spaces 4 for Museum Volunteers
FIRST CALL REGISTRATION

CLOSES FRIDAY 16 JULY

**Use a separate form for each person. This form may be photocopied
PLEASE PRINT**

SECTION ONE: Me

Given name - will be used on your name badge.		Surname.	
Postal address.			
Post Code:			
Home telephone:	Work telephone:	E-mail:	
Name of museum organisation that you represent. This will be used on your name tag. Please keep it short.			
Dietary requirements special requests. Please tick (✓) the box and attach details. <input type="checkbox"/>			

Essential: Before you continue please read the accompanying notes then complete sections Two and Three over-page.

We are unable to process incomplete registrations



