



Nassington Excavation 2017

Volunteer Application Form

No experience required

Please clearly print all details - Thank you

Personal Details

First Name: Family name:

Home Address:

Post Code:

Current Address (if different from above):.....

Post Code:

Tel. No.: Mobile No.:

E-mail address:

Your availability

The aim is to involve the maximum number of local people in this unique opportunity. Depending on the numbers who wish to volunteer, this may mean that applicants may be limited to fewer days on site than they say they are available for. You will be able to take part in several aspects of archaeology so please indicate clearly which aspects you are interested in. Please read the Frequently Asked Questions (FAQs). This will give you more information.

No experience is required but all volunteers will undergo an induction and be expected to come for at least ONE FULL DAY. Please tick the dates that you can attend. The Excavation will take place between Saturday 19th August & Saturday 2nd Sept 2017. **Volunteers will need to [become a member of MidNAG](#) to dig.**

Please put a tick in the 'EX' line if you wish to excavate and / or put a tick in the 'FP' line if you wish to process finds (i.e. washing and labelling finds) or put a tick in the 'OTHER' line if you want to help in some other way (i.e. support the archaeologists, making the tea, taking photos, etc.).

Activity	Sat 19 th	Sun 20 th	Mon 21 th	Tue 22 nd	Wed 23 rd	Thur 24 th	Fri 25 th	Sat 26 th
EX								
FP								
OTHER								
		Sun 27 th	Mon 28 th	Tue 29 th	Wed 30 th	Thur 31 st	Fri 1 st	Sat 2 nd
EX								
FP								
OTHER								

If you have ticked the 'OTHER' line, what would you like to do? If you are not sure what but are willing to help in any way say so here:

I have read the Frequently Asked Questions (FAQs). (**Please tick**) - Please be aware that the organisers may amend the excavation dates.

Are you a member of any archaeological / history society other than the Middle Nene Archaeological (Group MidNAG)? If 'YES' which one?

How did you hear about these volunteering opportunities? Please tick all that apply.

MidNAG	Nene Valley Arch Group	FRAG	Peterborough Museum Society	Local media	Personal contact

Medical information to be completed by all volunteers

Full Name: Female/Male: Date of birth:

In the event of an emergency we need to know the following information:

Name & relationship to next of kin:

Contact address & tel. no. if different from your home address:

..... Post code:

Contact Tel. number (if different):

Name of your Doctor:

Address:

.....Post Code:Tel. Number:

Do you suffer from any medical conditions: Yes / No If 'Yes' please give information as appropriate.

Do you take regular medication: Yes / No If 'Yes' please give information as appropriate.

Do you suffer from any allergies: Yes / No If 'Yes' please give information as appropriate.

Do you wear contact lenses: Yes / No Do you wear prescription glasses: Yes / No

Date of your last tetanus injection:

Please attach any additional information, which you think may be useful to support your application in a sealed envelope. Only the Site Director will see this document.

Before you sign this form please read the following information.

Please read the **Frequency Asked Questions** (FAQs) first before you complete this form as the information it contains will help you.

If for any reason your circumstances change once you have sent in your application form and you cannot attend please let the Volunteer Organiser know as soon as possible by phone (01832 273798) or by post to: Gill Johnston, Stone Walls, Glapthorn, Peterborough PE85BQ, or by e-mail (agjohnston1941@hotmail.com). Thank you. As part of the official record, MidNAG staff or their support staff will be taking photographs throughout the excavation period. By signing this form you agree that this material can be used by MidNAG for use in publicity material, websites and official records of the excavation.

Please post or e-mail this application form to the Organiser ASAP or at least six days before you want to be involved. **Please do not just turn up.** You will be sent a confirmation letter on receipt of your completed volunteer application form by post or e-mail or you may be phoned by a member of staff from MidNAG. You are advised to make a copy of this application. Please add a SAE if you wish confirmation of your application. Before you sign the form please check you have completed all sections. If you do not, this may delay your application in being processed. Thank you.

Signed: Dated:

Name (printed):

(If you are under 18 please ask a parent/guardian to sign below. You must be over 8 years to volunteer)

Signed: Relationship to volunteer - Parent Guardian (tick one)

Name (printed): Dated:

Please post your completed application form to Volunteer Organiser, Gill Johnston, Stone Walls, Glapthorn, Peterborough PE8 5BQ