



13 Crosby Road North | Tel: 0151 474 4076 | www.plazacinema.org.uk | email: info@plazacinema.org.uk
Registered Charity No. 1062570

FULL NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

EMAIL _____

DATE OF BIRTH _____

Why would you like to volunteer with the Plaza Community Cinema?

What would you like to gain from your volunteer experience?

What previous volunteer work, paid employment or studies have you done which may assist you in volunteering at the Plaza?

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AVAILABILITY

For ushers / floor staff, we operate a shift system as follows:

Mon - Fri : 4pm – 7pm / 7pm – 10.15pm
Sat – Sun : 12.30 – 4pm / 4pm – 7pm / 7pm – 10.15pm

If you volunteer as a member of the floor staff at the cinema, you would be expected to join one of the shifts. Please write which shifts you would be available to join:

REFERENCES

Please state the names and contact details of 2 references who would be happy to vouch for you:

Reference 1:

Name : _____ **Tel No:** _____
Address _____
_____ **email:** _____

Reference 2:

Name: _____ **Tel No:** _____
Address: _____
_____ **email:** _____

I certify that the information I have given is correct:

Signed: _____ **Date** _____

For office use only:

Date received: _____ **Date of interview** _____

Follow up action: _____