**くるみの里ボランティアバンク登録用紙**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 受付Ｎｏ. |  | | | | | |
| 受付年月日 |  | 年 |  | 月 |  | 日 |
| 受付者氏名 |  | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ふりがな |  | | | | | | | | | | | | | | | | | | | | | | | | 性　別 | | | | | | | 生年月日 | | | | | | | | | | | | 年　齢 | | | | |
| 氏　名 |  | | | | | | | | | | | | | | | | | | | | | | | | 男・女 | | | | | | |  | | | | | | | | | | | |  | | | 歳 | |
| 連絡先 | 住所 | | | 〒 | | | | |  | | | | | ― | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 電話番号: | | | | | |  | | | | | | | | | | | | | | | | | | | | ファクシミリ: | | | | | | | | | |  | | | | | | | | | | | |
| 携帯電話番号: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| メールアドレス: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 希望する  活動分野 | 該当する分野の**□**にレ点をつけてください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **□** 高齢者支援 | | | | | | | | | | | | | | **□** 障がい児･者支援 | | | | | | | | | | | | | | | | | | **□** 子育て支援 | | | | | | | | | | | | | | | |
| **□** 災害支援 | | | | | | | | | | | | | | **□** 生活支援(買物､掃除など) | | | | | | | | | | | | | | | | | | **□** 移動支援(車の運転､手伝い等) | | | | | | | | | | | | | | | |
| **□** 福祉施設支援 | | | | | | | | | | | | | | **□** 福祉イベント(行事)支援 | | | | | | | | | | | | | | | | | | **□** その他 | | | | | | | | | | | | | | | |
| 具体的  内容 | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 希望する  活動地域 | 主に活動を希望する地域に〇をつけてください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| １. | | 市内全域 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ２. | | 地区限定【 | | | | | | | | ①田中地区 | | | | | | | | | | ②滋野地区 | | | | | | | ③祢津地区 | | | | | | | | ④和地区 | | | | | | ⑤北御牧地区 | | | | | | 】 |
| 希望する  活動日  /時間帯 | 該当する活動日の**□**にレ点をつけてください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **□** 日 | | | | | | **□** 月 | | | | | | | | **□** 火 | | | | | | **□** 水 | | | | **□** 木 | | | | | | **□** 金 | | | | | | **□** 土 | | | |  | | | | | | |
|  | **□** その他（ | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ） |
|  | |  | | | 時 | | | |  | | | | 分 | | | ～ | | |  | | | 時 |  | | | | | 分 | | ／ | | | 特になし | | | | |  | | | | | | | | | |
| もっている  免許･資格  技術･特技 |  | **□** 特になし | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **□** あり | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 具体的  内容 | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 希望する  配信方法 | 該当する配信方法の**□**にレ点をつけてください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **□** メール配信 | | | | | | | | | | | | | | | | **□** ファクシミリ | | | | | | | | | | | | **□** 郵送 | | | | | | | | | |  | | | | | | | | |
| ※できる限りメール配信でお願いします。又郵送の場合は情報提供が遅れる場合があります。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 活動経験 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 備考 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ボランティア連絡協議会への入会 | | | | | | | | | | | | | | | | | | | する・しない | | | | | | | | 登録解除日 | | | | | | | |  | | | | | | 年 | |  | | 月 |  | | 日 |

(2017.02.20)