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|  | **BUDDHIST INSTITUTE SUNDAY DHAMMA SCHOOL**  ***(An Educational Division of Sasana Abhiwurdhi Wardhana Society)***  **BUDDHIST MAHA VIHARA, 123, Jalan Berhala, Brickfields, 50470 Kuala Lumpur, Malaysia**  **TEL : 603-2274 1141 : 603-2274 1886 Fax : 603-2273 2570 Website : www.bisds.org** |  |

**PRE - REGISTRATION FORM For NEW VOLUNTEER**

***( To be filled in Clearly & in Block Letters )***

BISDS encourages the participation of new volunteers who support our mission and objectives.

If you wish to serve in BISDS as a volunteer and are willing to be interviewed and trained in our procedures , we encourage you to complete this Pre-registration form.

The information on this form will be kept confidential and will help us to find the appropriate volunteer opportunity for you.

Thank you for your interest in serving in BISDS.

Name :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male / Female :- \_\_\_\_\_\_\_\_\_\_

Full Address :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact No:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any special talents or skills you may have that you feel would benefit BISDS :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tell us in which **areas** you are interested in volunteering ( tick box below )

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| * FACILITATORS IN DHAMMA CLASS      * RECRUITMENT &TRAINING * PUJA/ IT * REFRESHMENTS (F&B) | * TEACHING IN DHAMMA CLASS * PROJECT/STUDENT WELFARE * ADMIN/RESOURCE * OTHERS |

Any physical limitations ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of emergency, contact name & number :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As volunteer in BISDS, I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that BISDS, its EXCO and management as well as all affiliates, cannot assume any responsibility for any liability for any accidents, injury, death or health problems which may arise from any volunteer work I perform for BISDS. I declare that I am not blacklisted by the police dept as well as any other authorities. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary or rewards.

**Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I would like to take this opportunity to thank you for your interest.**

**May the Blessing of the Triple Gem be showered upon you and loved ones.**