

Berakah Volunteer Form International

Kindly print this form out, complete and fax to + 27 86 634 3386 or scan and mail to meleney@berakah.org.za

Name and Surname	
Residential Address	
Zip Code, City & State	
Country	
Telephone	
Fax	
Cell Phone	
Email	
Age	
Gender	
Marital Status (single, married, divorced, widowed, seperated, living together)	
Religion	
Church Affiliation	
Name of Your Pastor/Priest/Minister	
His/Her Telephone number	
If you are younger than 18 years:	
Name of Parent/s or legal Guardian	
His/Her/Their telephone number/s	
Please attach a written letter of concent from your parent/s or legal guardian	
How long do you wish to volunteer at Berakah?	
Dates of arrival and departure	
Airline and Flight number	
Are you physically fit?	
Do you have any serious/chronic medical condition?	
Do you smoke?	
Are you addicted to any substance?	
Do you have a criminal record?	
Do you have any experience in volunteer work?	
Pls provide detail:	
Is there a specific area of expertise that you wish to offer?	
Highest qualification	
Present employment	
Your signature	
Signature of your Parent/Guardian (under 18's)	