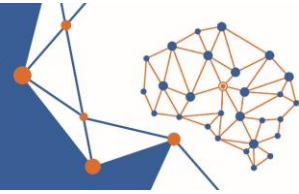


BRAIN TUMOUR SOCIETY (SINGAPORE) LIMITED

📍 10 Raeburn Park #02-08 S(088702)

☎ 8738 5669 @ services@braintumoursociety.org.sg

**BRAIN
TUMOUR
SOCIETY**
(SINGAPORE)**VOLUNTEER REGISTRATION FORM****PERSONAL DETAILS** *(Please tick as appropriate)*

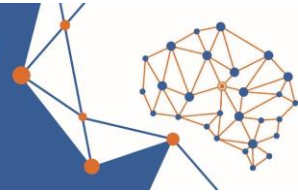
Name <i>(as in NRIC)</i>			Mr	Mrs
			Miss	Mdm
			Dr	Others
Address			Date of Birth <i>(DD/MM/YY)</i>	
			Gender	
			Male	Female
			Nationality	
			Race	
Email			Occupation	
			Mobile Tel	
			Home Tel	
		Office Tel		
EMERGENCY CONTACT				
Name			Relationship	
			Tel No.	

ABOUT MYSELF *(Please tick as appropriate)*

Any Volunteering Experience	Yes		No	
Preferred Frequency	Regularly	Yearly	Monthly	Weekly
	Ad-hoc Event/ Project Basis			
Preferred Day(s)	Weekday		Weekend	
Preferred Time <i>(at least 4 hours)</i>	Morning		Afternoon	Evening
My interest(s) and Area(s) of Specialty	Administration		Finance	Legal
	Fundraising		IT Support (Web)	Events
	Media Relations		Marketing / Awareness	
	Graphic Design		Support Group Befriending	

Other specialised skills and past experiences

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CONSENT IN RELATION TO PERSONAL DATA PROTECTION ACT

By the completion and signing of this Volunteer Registration Form, I give consent to BTSS for the following:

- i. Collect and use my personal data for all purposes related to maintaining, updating, and otherwise administering BTSS' records (participation in events / projects, awareness and fundraising events, or other services) in connection with my intent to join BTSS as a volunteer.
- ii. Contact me by telephone or send messages to me via telephone, mobile and/or email in connection with purposes related to (i) above.
- iii. Take and use photos and videos taken at BTSS events and/or projects organised by BTSS that feature me to be used as a resource for BTSS's purpose (e.g., documentation to evaluate events/projects, promoting awareness, advocacy, fundraising, etc).
- iv. To process my personal data for additional purposes as set out in BTSS's Privacy Policy (<https://www.braintumoursociety.org.sg/privacy-policy/>).
- v. Not to hold BTSS liable for any loss of belongings or injury sustained during the course of my voluntary work.
- vi. Not to carry out any personal activities, e.g., sales, recruitment, etc during the course of my voluntary work.
- vii. I will not disclose the confidential information or make use of the same to the benefits of my individual interest written consent of BTSS.
- viii. All confidential information and all rights therein shall remain the sole and exclusive property of BTSS.
- ix. Any personal data disclosed by me herein will be retained by BTSS and its concerned entities as long as any of the purposes set out in BTSS's Privacy Policy remain valid.

I agree that the information provided above is accurate and completed to my best knowledge and undertake to accept my role as a volunteer and abide by its rules and regulations.

Volunteer
Signature/ Name/ Date

Parent & Guardian[#]
Signature/ Name/ Date

[#]Volunteers who are below the age of 18 must obtain the signatory of Parent/ Guardian. A volunteer must not be younger than 13 years old.