



# Service by Emergency Rider Volunteers Application Form

(Please print your details CLEARLY and ACCURATELY – Thank you)

## ***Your personal details***

Title (Mr. Mrs. Ms. Miss – Other)	
Surname	
First name	
Middle names	
Preferred / nickname	
Age	
Occupation	
House /flat name/number	
Road name	
Area	
Town	
County	
Post Code	
Home phone number	
Work phone number	
Mobile phone number	
email address	
Reflective tabard size	S / M / L / XL / XXL / XXXL / XXXXL

## ***Next of kin***

Title (Mr. Mrs. Ms. Miss – Other)	
Surname	
First name	
Relationship	
House /flat name/number	
Road name	
Area	
Town	
County	
Post Code	
Home phone number	
Work phone number	
Mobile phone number	

Please continue on page 2

**Vehicle Details**

Bike 1 Type	
Bike 1 Registration number	
Bike 2 Type	
Bike 2 Registration number	

Car 1 Type	
Car 1 Registration number	
Car 2 Type	
Car 2 Registration number	

Driving Licence number	
Advanced test pass number	
Date of advanced test	
AA membership number	
RAC membership number	
Other rescue organisation	
Other membership number	

**Voluntary duties offered** (Please put a *X* for any of the following that you are prepared to help with)

Duty Rider/Driver	
Weekly Controller	
Route Training	
Emergency stand-by	

Collectors	
General	
Charity days	
Publicity	

**Please email this completed form to the address below including a passport sized photo for your ID card. Digital pictures can be resized but should ideally be in the ratio of 9:7 (45mm x 35mm).**

Please email to [membership.suffolk@serv.org.uk](mailto:membership.suffolk@serv.org.uk)  
 Fax to: **0871 900 4846**