



义工登记表 VOLUNTEER REGISTRATION FORM

请完整填写表格的每个栏位，有不适用处，请注明 NA。Please fill in ALL fields and indicate NA where applicable.

个人资料 Personal Particulars

英文姓名 Name: 中文姓名 Name (in Chinese characters):
(*Mr / Miss / Mdm / Mrs / Dr)

居民证/准证号码 NRIC/FIN No.: 出生日期 Birthdate: 性别 Gender: 男 M
(最后四个字符 last 4 characters. Eg. SXXXX123A) (DDMMYYYY) 女 F

种族 Race :
 华族 Chinese 欧亚族 Eurasian 印族 Indian 马来族 Malay 其他 Others (请注明 please state):

国籍 Nationality : 出生国家 Country of Birth :

职业 Occupation : 最高教育程度 Highest Educational Level :

住址 Address:
..... 邮区 Postal Code

联络号码 Contact No. : (手机 HP) (住家 H) (办公室 O)

婚姻状况 Marital Status : 单身 Single 已婚 Married
 离婚 Divorced 寡居 Widowed 拥有汽车 Own Car ? 有 Yes 没有 No

电邮 Email :
餐饮选择 Meal Preference (请打勾 Please tick √) : 普通 Normal 素食 Vegetarian
T-恤尺码 T-shirt size (请圈 please circle) :
3XS (32) / XXS (34) / XS (36) / S (38) / M (40) / L (42) / XL (44) / XXL (46) / 3XL (48) / 4XL (50) / 5XL (52)

语言能力 Language Fluency: 英文 English 中文 Chinese 其他 (如: 方言) Others (e.g. dialects):

特别技术/才能 Special Skills / Talents (请打勾 Please tick √) :

- 辅导 Counselling
- 摄影 Photography
- 设计技术 (例如: 设计传单、布条、网页等等) Design Skills (e.g. Design flyer, banner, webpage)
- 基本急救术 First Aid
- 其他 (例如气球雕塑技术, 剪发) Others (e.g. Balloon Sculpting Skills, Haircut):

紧急联络资料 Emergency Contact Information (请打勾 Please tick √) :

紧急联络人 Emergency Contact Person: 联络号码 Contact Number :

紧急联络人与你的关系 Relationship with you :

- 家长 Parent 配偶 Spouse 兄弟姐妹 Siblings 孩子 Child 亲戚 Relative 朋友 Friend

义务服务项目 Areas for Volunteering (请打勾 Please tick ✓)

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| 功课督导小组 Supervised Homework Group (为小学高年级学生提供功课督导 Mentoring & Tutoring Programme for Primary 4 - 6 students) |
| Project YOUth Can Shine (为中一及中二学生提供功课督导 Mentoring & Tutoring Programme for Secondary 1 - 2 students) |
| 儿童启蒙阅读计划 kidsREAD (为5-8岁儿童提供英语阅读 English Reading Programme for children 5 - 8 years old) |
| 家庭辅导 Family Befriending (成为义务督导或家庭义务辅导员 As family befrienders) |
| 陪你知天下 News Sharing Programme (为年长者分享时事新闻 News sharing session for seniors) |
| 行政工作 Administrative Work |
| 筹办与执行活动 Special Projects/Ad-hoc Events |

欲了解更多有关各项目及其要求的详情, 请浏览我们的网站 <http://www.cdac.org.sg/> 或拨电 6841 4889 询问。
For more details regarding the programmes and requirements, visit our website <http://www.cdac.org.sg/> or call us at 6841 4889.

可以提供义务服务的日期、时段和地点 Preferred Volunteering Day, Time and Venue (请打勾 Please tick ✓)

- 日期 Day : 周日 Weekdays 周末 Weekends
 时段 Time : 任何时间 Anytime 早上 Morning 下午 Afternoon 傍晚 Evening
 地点 Location : 中区 Central 东北 North East 西北 North West 东南 South East 西南 South West



目前或之前的义务工作经验 Current or Prior Volunteering Experience

| 组织 Organisation | 服务期限 Period of Service | 义务任务类型 Type of Voluntary Work Performed |
|-----------------|------------------------|---|
| | | |
| | | |
| | | |

问卷 Survey

您是如何认识我们的? How did you know about us? (请打勾 Please tick ✓)

- 华社自助理事会中心 CDAC Centre
 网站/社交媒体 CDAC Website / Social Media (e.g. Facebook, Instagram)
 家人/朋友/同事 Family/Friend/Colleague
 报纸/电台 Newspaper/Radio
 其他 Other:

您是否曾经在华助会的援助计划下受惠? Have you benefitted from CDAC Programmes? 是 Yes / 不是 No

若有, 请注明受惠计划 If yes, please specify the programme(s):

宣言 Declaration

个人宣言 Personal Declaration

请回答以下问题。若对任何情况指出“有”，请详细说明。Please answer the following questions. If “Yes”, please specify.

| | | |
|---|--|--|
| 1. 您是否曾经在任何国家法律的规定下被判有罪？ Have you ever been convicted in a court of law in any country? | <input type="checkbox"/> 有Yes <input type="checkbox"/> 没有No | |
| 2. 您是否有任何债务（房屋贷款除外）？ Are you presently in debt (except housing loan)? | <input type="checkbox"/> 有Yes <input type="checkbox"/> 没有No | |
| 3. 您是否曾经被任何机构拒绝您的义务服务申请？ Have you ever been rejected by any organisation for your application as a volunteer? | <input type="checkbox"/> 有Yes <input type="checkbox"/> 没有No | |
| 4. 您是否有任何疾病或残疾，可能会影响您执行某些义务任务（例如：哮喘、糖尿病、心脏问题、高/低血压、精神疾病）？ Do you have an illness or disability that may affect you from performing certain volunteering tasks? (e.g. Asthma, Diabetes, Heart Condition, High/Low Blood Pressure, mental-related illnesses) | <input type="checkbox"/> 有Yes <input type="checkbox"/> 没有No | |

收取个人资料 Collection of Personal Data

华助会严格遵守个人资料保护法令，并采取适当的步骤确保您的个人资料受到妥善保管及正确使用。只有经过授权的工作人员可存取您的个人资料。In line with the Personal Data Protection Act, CDAC takes reasonable steps to keep securely the collected personal data with no misuse or unauthorised disclosure of the data according to the Act. Only authorised personnel are permitted to have access to your personal data.

我在此同意并允诺 I hereby agree and undertake that :

- i) 我提供给华助会的个人资料是为了成为华助会的义工，以提供义务服务为目的；
- ii) 我同意我所提供的个人资料是为了参加华助会所主办的义务项目及相关活动；
- iii) 我同意华助会拍摄、录制及使用我的照片、录相、录音、名字、采访，为华助会宣传。宣传的管道包括及不局限于年度报告、网站、刊物和宣传材料等；及
- iv) 我将会严格保密在我服务过程中所获得有关华助会或受患者的信息和资料。
 - i) My personal information which has been provided is for the purposes of volunteering with the Chinese Development Assistance Council (CDAC);
 - ii) I consent to the disclosure of my personal data to CDAC for any and all volunteering related activities/events that I have registered for;
 - iii) I allow CDAC to take, record and use my photo, name, likeness, image, voice, interview for the purposes of publicising CDAC and its activities in its publications, including but not limited to, Annual Reports, Website(s) and other publicity/publication materials; and
 - iv) I shall strictly adhere to the confidentiality of all information of CDAC and its beneficiaries during my course of service.

免责声明 Indemnity

我已经阅读，理解并同意以下项目 I have read, understand and agree with the following:

我明白及接受义工报名参加由华助会主办或联办的活动/项目带有潜在的，可预见或无法预见的风险。我知道华助会将采取措施控制及减低风险，我同意永远免除华助会，其职员，义工，受患者，合作伙伴及主办单位的赔偿及法律责任。

我明白义工如果在参加由华助会主办或联办的活动/项目时受伤、伤亡等意外情况发生或有任何经济损失，而造成这些伤亡意外或经济损失并不是基于人为疏失或有意的行为，华助会，其职员及/或合作伙伴将无须负任何法律责任。

I recognise and accept that my participation in any and all activities/events I have registered for as a volunteer involves certain amount of risks, both foreseeable and unforeseeable. Whilst all due care is taken by CDAC to manage and minimise risks, I do undertake to release and discharge CDAC, its staff, volunteers, beneficiaries, partners, or any other partners from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my participation and/or attendance at any activity or event organised or co-organised by CDAC.

CDAC, its officers, employees and/or partners will not be held liable for any death, personal injury, illness, or property damage that may result from a volunteer's participation and/or attendance at any activity or event organised or co-organised by CDAC, where such damage to or loss of property or any injury or loss of life is not caused by the negligence or wilful act or omission of CDAC and/or its partners.

我谨此声明以上所提供的资料全部属实，并没有隐瞒任何有关详情。我已经阅读，明白并同意以上有关收取个人资料及免责声明的条款。I declare that all the information I have given above is true and correct to the best of my knowledge and that I have not withheld any relevant particulars. I have read, understand and consent to the Personal Data Collection and Indemnity clause stated above.

姓名 Name

签名 Signature

日期 Date

家长/监护人同意书 Parental / Guardian Consent Form
(18 岁以下的登记者 For registrant below the age of 18)

致 家长/监护人

华社自助理事会（华助会）是个非营利的自助团体。我们为较弱势的华族社群提供各项计划和援助，通过自助与互助，协助他们发挥潜能，力争上游。

我们欢迎你的孩子/监护孩子加入华助会的义工团队。我们期待你对他/她的义务工作给予鼎力支持。

To Parents/Guardians

The Chinese Development Assistance Council (CDAC) is a self-help organisation set up by the Chinese Community for the Chinese Community. CDAC offers programmes and assistance schemes to help the less-privileged in the community to maximise their potential and strive for social mobility through self-help and mutual support.

We are heartened that your child/ward would like to join our volunteer family to impact lives. We look forward to your support to his/her volunteering work with CDAC.

| *家长/监护人姓名 Name of *Parent/Guardian | 与登记者的关系 Relationship with Child/Ward | 联络号码 Contact No. |
|---------------------------------------|---|---------------------|
| | | |

我是以上登记者的*家长/监护人。我允许我的*孩子/监护的孩子成为华助会的义工。我已经阅读有关收取个人资料及免责声明的条款，并给予同意。我将会为这份同意书和声明负责。

I, hereby confirm that I am the *parent/guardian of the above-named. I give my permission for my *child/ward to register as a CDAC volunteer. I have read and give on behalf of *him/her the same consent for Personal Data Collection and Indemnity clause. I will bear full responsibility for this consent and declaration.

*家长/监护人签名 Signature of *parent/guardian

日期 Date

**Delete where applicable*

请将表格寄交或电邮至 Kindly send or email the registration form to:

Chinese Development Assistance Council
Volunteers Engagement & Development Department
CDAC Building, 65 Tanjong Katong Road
Singapore 436957
Reg No.199202625K

Email: volunteer@cdac.org.sg
Tel: 6841 4889

华助会将评估每个申请并保留拒绝义工的申请的决定权。

CDAC will assess the suitability of volunteers and respectfully reserves the right to decline the volunteering request.

| For Official Use: | | |
|------------------------------------|-------------------------------|---------------------------|
| Deployment Area & Centre: _____ | Programme-in-charge: _____ | Deployment Date: _____ |