

**CAYMAN LGBTQ FOUNDATION STUDENT MEMBER APPLICATION FORM**

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Date of birth:** \_\_\_\_\_

**Gender<sup>2</sup>:** He | She | They | Other: \_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Do you use texting or messaging apps?**

**How would you like us to contact you?<sup>3</sup>**

- Text
- WhatsApp
- Signal
- Telegram
- Other: \_\_\_\_\_
- I do not use any messaging apps

- Telephone/Mobile
- Text/Messaging App
- Email
- Other: \_\_\_\_\_

**Parent/Guardian Information**

Please provide the contact details of your parent(s)/guardian(s).

**Parent Name:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Parent Number:** \_\_\_\_\_

**Parent Number:** \_\_\_\_\_

**Parent Address:** \_\_\_\_\_

**Parent Address:** \_\_\_\_\_

**Relationship to you:** \_\_\_\_\_

**Relationship to you:** \_\_\_\_\_

**Do you have any previous experience working with volunteer or non-profit organizations?**

**Have you worked or volunteered with LGBTQ individuals before?**

- Yes
- No

- Yes
- No

**Are there any reasonable adjustments you may need while volunteering with us?**

Please note that this will not have a negative impact on your application. It is for us to make sure your volunteering experience is as positive as possible.

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**Application Questions**

These questions are for us to get to know you better and see which volunteering activities may best suit you.

**Tell us about yourself. What are you passionate about? Hobbies/Interests?**

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\_\_\_\_\_  
\_\_\_\_\_  
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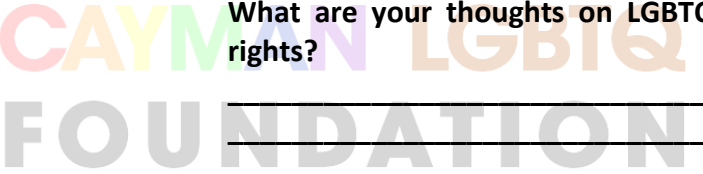
**Which of the following areas interest you? Select all that apply.**

- Administration
- Advocacy
- Charity/Outreach
- Education/Teaching
- Fundraising
- IT
- Media
- Mentoring
- Networking
- Social Media
- Other: \_\_\_\_\_

**What times would you be available for volunteering activities? Select all that apply.**

- Anytime
- Weekdays (during the day)
- Weekdays (in the evenings)
- Weekends
- Mondays
- Tuesdays
- Wednesdays
- Thursdays
- Fridays
- Saturdays
- Sundays

**What are your thoughts on LGBTQ rights?**



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

**What skills or experience do you feel you can bring to the CLGBTQF?**

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

**What's it like at your school for LGBTQ students?**

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

**Is there anything in your background (e.g. criminal record, conviction, medical issues, etc.) which you think may affect your suitability to volunteer in certain areas at Cayman LGBTQ Foundation?<sup>4</sup>**

- Yes
- No

**Declaration for parents**

Please read each term below carefully and check all boxes indicating that you and your child/ward have read, understand, and are in agreement with them. If you do not check all of the below terms, you will be considered as not in agreement, your application will be treated as incomplete and will be disregarded. Your child/ward will have to reapply, and you will have to agree to all terms below for your child/ward to be considered and accepted as a Junior Member of the Cayman LGBTQ Foundation.

I understand and agree:

- I consent to my child/ward being a Junior Member of the Cayman LGBTQ Foundation.
- the Cayman LGBTQ Foundation may hold and use personal information about me and my child/ward for volunteering reasons and to keep in touch with me.
- our personal information (for myself and my child/ward) I submit via this form may be stored both manually and/or electronically.
- our personal information will be held securely and handled in accordance with best practice and the Cayman Islands Data Protection Law.
- our personal information will be accessed only by authorized personnel in the Cayman LGBTQ Foundation.
- to pay a membership-fee of CI\$25 upon acceptance of my child/ward as a member of the Cayman LGBTQ Foundation and every year they are a Junior Member/Volunteer.
- my child/ward must exhibit acceptable social behavior and must conform to all reasonable instructions from supervising adult members while out on any volunteering activity.
- that if my child/ward does not exhibit acceptable social behavior and/or does not conform to reasonable instructions from supervising adult members while out on any volunteering activity, they will be removed from the volunteering activity and potentially banned from the Foundation if gross misconduct is displayed.
- that if my child/ward deliberately steals any monies, or damages any property belonging to the Foundation or the venue(s) of any volunteering activity, I shall be solely responsible for compensating the Foundation or venue upon demand.
- to the Foundation's Mission Statement of working towards creating and maintaining a safe, inclusive, and equitable culture for the LGBTQ+ community of the Cayman Islands and to be committed to building relationships across each sector that will ensure a safe and culturally sensitive environment amongst our three islands.

<sup>2</sup> There is no obligation to answer, but it will help us address you as you wish to be addressed.

<sup>3</sup> Please select all that apply, but kindly note that when we contact you, we will usually only use one (not all) preferred method.

<sup>4</sup> This information is kept completely confidential. If you choose 'yes', a separate meeting will be held with the Director of the Cayman LGBTQ Foundation for further discussion. Please note, a criminal record may not necessarily disqualify you from being a volunteer with the Cayman LGBTQ Foundation.