

Youth Members: Membership and Garda Vetting Forms (Ages 16 & 17)

To join Irish Red Cross, please complete the membership form on page 2.

You will be asked to select the activities you are interested in - Please note that if you select an activity that requires Garda Vetting, you must complete the forms on pages 3-6.

Tips for completing your membership form

Youth Membership Application Form:

In order to provide your membership card, we will need a current, passport-sized photograph. This can be manually attached to the form or emailed to membership@redcross.ie stating your name and "card photo" in the subject line of your email.

Irish Red Cross ID Verification Form (only for roles requiring Garda Vetting)

Before we can process your Garda Vetting Form, it is a Garda Vetting requirement that you complete an Identification Check. The ID Verification form must be signed off by the local Irish Red Cross Branch you are joining. The form must be signed by either the Secretary, Treasurer, Chair, or Vice-Chair within the Branch.

Page 4 shows a list of acceptable ID documents. Please be sure to enclose a photocopy of the ID you used to verify your identity with your chosen branch. Only one form of ID is needed if you are under18.

Youth E-Vetting Invitation Form - NVB1 (only for roles requiring Garda Vetting)

The NVB1 form requires your current address and an email address. We submit your E-Vetting Invitation to the National Vetting Bureau. They then send you an email containing a link that allows you to complete your Garda Vetting application online.

Please complete the NVB1 form in BLOCK CAPITALS using ball point pen so that your information is clear and legible. Please send the original, signed form to us.

Garda Vetting Parent/Guardian Consent Form (NVB3) (only for roles requiring Garda Vetting)

This form must be completed and signed by the parent or guardian of the member applying for Garda Vetting

Membership Pack Checklist (only for roles requiring Garda Vetting)

Please complete this checklist to ensure you have provided everything for us to process your application. If you do not include all required documents, we will return the forms to you for completion, which may delay your membership and/or Garda Vetting being processed.

Please post to: FREE POST, Membership Section, Irish Red Cross, 16 Merrion Square, D02 XF 85



16 Merrion Square, Dublin 2, DO2 XF85 T+353 1 642 4600 E membership@redcross.ie W www.redcross.ie

YOUTH MEMBERSHIP APPLICATION FORM (AGES 16 & 17)

Please complete this form in order to apply for your membership of the Irish Red Cross.

Photos can be attached to this form or emailed to membership@redcross.ie.

Full membership of the Irish Red Cross will be issued when the relevant steps have been completed. We will be in touch with more information regarding these steps on receipt of this application.

While awaiting membership confirmation there are activities which you will be able to get involved in —your local branch will be able to provide you with more details.

Please contact membership@redcross.ie if you require any further information.

Please affix photo or email to: nembership@redcross.ie

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Please complete using BLOCK CAPITALS	WHAT KIND OF ACTIVITIES ARE YOU INTERESTED IN?*: Unit Member (Requires Garda Vetting)											
Date: DD/MM/YYYY	Activities include but are not limited to: Event First											
Branch*	Aid, Emergency Response, Rescue Teams (not											
*If you do not know your local branch please contact us and we can assist you.	available in all branches), Cardiac First Responder Groups.											
Surname	Youth Activities											
First Name	Activities include but are not limited to: weekly											
	training in First Aid, health & hygiene, humanitarian issues and personal development, and fun social											
Title: Mr. Mrs. Ms. Other	activities.											
Address	Community Support (Requires Garda Vetting)											
	Skin Camouflage Service or Therapeutic Care Service.											
	Community Support											
	Activities include but are not limited to:											
Eircode	Psychological First Aid, transport to hospital appointments.											
PARENT/GUARDIAN CONTACT DETAILS	Local Links											
Home Tel:	Activities include but are not limited to: Support for											
	refugees and vulnerable migrants. Fundraising											
Tel:												
Email:	*Please check with your branch to find out if											
	these activities are available in your area											
Date of Birth:												
Gender: Male Female Non-binary	Other (please specify)											
I confirm that nothing within my personal or profess which involves working with young people or vulnera	sional background deems me unsuitable for a position											
I understand that I will be required to adhere to the F												
Movement;	The second of the second secon											
I understand that I will be bound by the Constitution	and Operating Rules of the Irish Red Cross;											
I declare that the above information is true and I agr of the Irish Red Cross	ree to accept the terms and conditions of membership											
Parent/Guardian Signature	Date DD/MM/YYYY											



Section 1 - to be completed by Applicant

IRISH RED CROSS ID VERIFICATION FORM

Before we can process your Garda Vetting Form, it is a Garda Vetting requirement that you complete an Identification Check. Please see the form on page 5, only one ID required for those under 18.

Please bring this form with section 1 completed and your original ID documentation to your chosen branch.

Full Name:
Membership Number (if applicable):
Branch:
Area:
Section 2 - to be completed by Branch Officer - Secretary/Chair/Vice-Chair/Treasurer/Unit Officer/Youth Officer/Community Support Officer Branch Officer Name:
Position Held:
Membership Number:
Please State Documentation verified - (see overleaf for options):
1
2
The applicant has provided documentation to validate their identity in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.
Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to knowingly make a false statement for the purpose of obtaining, or enabling another person to obtain a Disclosure.
I, the Branch Officer confirm I have seen the original of the verified documentation.
Please tick box
Branch Officer Signature:



Garda Vetting Acceptable Identity Documents Checklist

In order to establish a person's identity for vetting purposes, an individual must provide proof of:

- Valid photographic ID to include name and date of birth.
- Evidence of current address.

You must present your original documents to a vetting verification officer in your Branch, who will check the documents and complete the ID verification form. Please bring the vetting invitation form (NVB 1) with you and complete and sign it in the presence of the verification officer. Send a copy of your ID documents along with your completed vetting invitation form and the ID Verification form to Freepost, Garda Vetting Section, Irish Red Cross, 16 Merrion Square, Dublin. D02 XF85.

The documents provided should add up to 100 points. However in exceptional circumstances your identity may be established without scoring 100 points, at the discretion of the National Safeguarding Manager.

Acceptable Photo ID	Points	Tick
Irish driving licence or learner permit (new credit card format)	80	
Irish driving licence or learner permit (old paper format)	40	
Passport (from country of citizenship)	70	
Irish certificate of naturalisation	50	
Internation Protection Office Card (Temporary Residents Card)	50	
Garda National Immigration Bureau card (GNIB)	50	
National Identity Card for EU/EEA/Swiss citizens	50	
National age card (issued by An Garda Siochana)	25	
ID card issued by employer (name only)	25	
NOTE: The Public Service Card/Social Welfare Card is not accepted		
Acceptable Proof of Address ID		
ID card issued by employer (with name and address)	35	
Letter from employer (within last two years) confirming name and address	35	
Payslip or Employment Detail Summary (with home address)	35	
Utility bill e.g. gas, electricity, television, broadband (less than 6 months old). Printed online bills are acceptable	35	
Letter from an official refugee accommodation provider or pledged accommodation, confirming name and current address	35	
Bank/Building Society/Credit Union statement	35	
Credit/debit cards/passbooks (only one per institution)	30	
Current driving licence showing current address (if used as your proof of address, a separate document is required for photo ID)	30	
Membership card (in date) from a club, educational institution, trade union or professional body	25	
Letter from an educational institution confirming active student status and address	25	
Letter from an educational institution/SUSI/CAO in relation to a current course/financial assistance	20	
Letter from an insurance company regarding an active policy	20	



Your Ref: (office use only)

Vetting Invitation Youth

Section 1 – Pe	ersona	al Ir	nfori	mat	ion																				
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Forename(s):																									
Middle Name:																									
Surname:																									
Date Of Birth:	D D	М	М	Υ	Υ	Υ	Υ				_														
Parent / Guardia Email Address: Parent / Guardia Contact Number	n —																								
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Current Address	s:																				!				_
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Section 2 – Ad	ditio	nal	Info	rma	atio	n																			
Name Of Organisa	tion:	L	Iris	h Re	ed (Cro	SS																		
I have provided d I consent to the Liaison Person pt 2016. Please tick	making ursuan	g of t to	this a	appli	icati	on a	nd t	o th	e dis	sclos	sure	of	info												
Applicant's Signature:												D	ate	:	DI]]]]/	\[\triangle	1 M		/[ΥΥ	ΥΥ		

AN GARDA SÍOCHÁNA



NATIONAL VETTING BUREAU

PARENT/GUARDIAN CONSENT FORM (NVB 3)

Applicant Details																									
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Parent/Guardian Details																									
Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.																									
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Relationship to applicant: Father: Mother: Guardian:																									
Address:																									
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Eircode/Postcode:							T																		
Parent/Guardian Consent I, being the Parent/Guardian of the above named applicant, consent for the National Vetting Bureau to																									
conduct vetting in r (Children and Vulne	espe	ct of	f the	ab	ove	nan	ned	ap	plic	ant	in a	acco	rda	anco	e wi	th t	he	Nat	ion	al V	ett	ing	Bui	eau	
Parent/Guardian Signature:												Da	te:]/	M	M]/	1	Y	/ Y	Υ				



Membership Pack Checklist

IRISH RED CROSS PRIVACY POLICY

6. Parental Consent Form

We hold information about our members and this information is shared within the Irish Red Cross network. It is not our policy to pass names, addresses or contact details of our members to third parties for their use. As a member of the Irish Red Cross we may write to you occasionally to keep you updated on current projects and appeals. If you do not wish us to send this information to you, please tick this box: Before submitting your application, please ensure that you have completed and attached all of the below in order to ensure we can process your application: 1. Privacy Policy read and enclosed 2. Completed Membership Form 3. A photocopy of the ID you have shown to the Branch Officer 4. Completed ID Verification Form 5. Completed Vetting Invitation Form NVB1

Please send all of the above together to:

Membership Section, Irish Red Cross, 16 Merrion Square, Dublin 2, D02 XF85