

TRIM Reference: _____



VOLUNTEER APPLICATION

I WOULD LOVE TO VOLUNTEER

Please tick the appropriate venue/program you wish to volunteer your time. If you wish to volunteer for more than one, please rank in order your preference.

- | | |
|------------------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Art Gallery (GRAG) | <input type="checkbox"/> Queens Park Theatre (QPT) |
| <input type="checkbox"/> Bushfire Brigade please specify brigade _____ | |
| <input type="checkbox"/> Community Nursery | <input type="checkbox"/> Visitors Centre |
| <input type="checkbox"/> Geraldton Regional Library | <input type="checkbox"/> Youth Development |
| <input type="checkbox"/> QEII Seniors & Community Centre | |
| <input type="checkbox"/> Other/Event: please specify _____ | |

APPLICANT DETAILS

First Name: _____ Middle Name(s): _____

Last Name: _____ Date of Birth: _____

Gender: Optional _____ Occupation: _____

' U L Y H U I V / L F H Q F H 1 X P E No: _____ Cat: _____

Ethnic Background: Optional Aboriginal/Torres Strait Islander
 Other pls specify _____

Residential Address

Street: _____

Suburb/Town: _____ Postcode: _____

EMERGENCY CONTACT DETAILS

First Name:

Last Name:

OFFICE USE

Bushfire Brigade ±Brigade Captain and Local Government Authority Approvals

BC Name: _____

Signature: _____ Date: _____

LGA Name: _____

Signature: _____ Date: _____