

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"/> Community Nursery | <input type="checkbox"/> Visitors Centre |
| <input type="checkbox"/> Geraldton Regional Library | <input type="checkbox"/> QEII Seniors & Community Centre |
| <input type="checkbox"/> Art Gallery (GRAG) | <input type="checkbox"/> Bushfire Brigade <i>please specify brigade</i> |
| <input type="checkbox"/> Other/Event: <i>please specify</i> | |

APPLICANT DETAILS

First Name:

Middle

NameBT/F1 12 T1

RELEVANT TRAINING, SKILLS AND QUALIFICATIONS

AVAILABILITY TO VOLUNTEER

Start Date: _____ End Date: _____

Number of Hours: _____

OFFICE USE

Bushfire Brigade – *Brigade Captain and Local Government Authority Approvals*

BC Name: _____

Signature: _____ Date: _____

LGA Name: _____

Signature: _____ Date: _____