



Volunteer Registration Form

THIS FORM IS TO BE COMPLETED BY ALL VOLUNTEERS PARTICIPATING IN CMTEDD ENDORSED VOLUNTEER PROGRAMS.

Privacy Statement

Chief Minister, Treasury and Economic Development Directorate (CMTEDD) is collecting the information in this form in accordance with the *Information Privacy Act 2014*, for the purposes of assessing your eligibility to participate in a CMTEDD endorsed volunteer program.

CMTEDD will only disclose your personal information that is required to administer the delivery of the volunteer program that you have registered for. CMTEDD will not disclose your personal information without your consent unless required by law. A copy of the privacy policy is available on the Directorate's website:

<http://www.cmd.act.gov.au/legal/privacy> .

Personal information

First name Last name

Address Suburb

Postcode Email Address Telephone (H)

Mobile DOB Gender (optional)

Preferred method of contact (for activity information): Email Phone Post

Working with Vulnerable People (WWVP) card details *(please provide details if you have a clearance. Note, this is not necessary or mandated.)*

Registration number Expiry date

Please provide the volunteer manager with a copy of current WWVP card

Please tell us what why you would like to volunteer with Stromlo Forest Park?

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How did you hear about volunteering with Stromlo Forest Park?

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Skills/Experience/Qualifications

Please outline and specialised skills, experience or qualifications you have that you would like to utilise in a volunteering position with Stromlo Forest Park.

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Do you speak any languages other than English? If so please specify.

Emergency contact details

Name..... Relationship (*optional).....
Telephone (H)..... (M).....

Medical Information

Do you have any health/medical issues that may affect your participation? Yes No

If yes, please provide the following details so that we can best help you in an emergency:

Pre-existing injury or medical condition:

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Action required(e.g. epi pen for an allergy reaction):

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- I agree to provide and wear appropriate Personal Protective Equipment (PPE) as per requirements listed in the SFP Volunteer Policy (at a minimum, long sleeved shirt, long pants, enclosed shoes, gloves, sunscreen, water and broad-brim hat)
- I consent to my images being used in media/marketing (including but not limited to digital, print, social media)
- I agree to abide by Stromlo Forest Park's Code of Conduct
- I agree to undertake an onsite *Work Health and Safety* induction upon commencement

Volunteer

Name:

Signature (volunteer): Date:

Co-Signature (parent/guardian/carer) for
Volunteers (between the ages of 8 and 18): Date:

Name (parent/guardian/carer):

Note – volunteers between the ages of 8 and 15yrs 11 months (16) are required to be supervised by a parent/guardian/carer for the duration of each volunteer session.

Stromlo Forest Park Volunteer Manager

Name:

Signature:Date:
