VOLUNTEERS REGISTRATION FORM
ROCK & ROLL RENDEZVOUS – SUNDAY 9 APRIL 2017

*SURNAME (Mr/Mrs/Ms/Miss)		*FIRST NAME			
ADDRESS		SUBURB		P/CODE	
PHONE Home		PHONE Work			
MOBILE		EMAIL			
DATE OF BIRTH		OCCUPATION			
EMERGENCY CONTACT PERSON	Name: Relationship:	PHONE Home PHONE Work PHONE Mobile			
MEMBER OF A CAR/BIKE CLUB?		DO YOU HAVE YOUR OWN TRANSPORT YES / NO			
OTHER EVENT EXPERIENCE….					
PREFERRED ROLE/S AT THE EVENT. (If any)	1.	2.			
	3.	4.			
DO YOU HAVE PREFERRED CO-WORKERS? (People you prefer to work with – Please list….)					

* DATES and TIMES AVAILABLE (please tick dates & times you are available)

❑ Fri 7 APRIL	❑ Sat 8 APRIL	❑ Sun 9 APRIL	❑ Mon 10 APRIL
Times:	Times:	Times:	Times:

* DO YOU REQUIRE A POLICE CHECK FORM? YES / NO

CONFIDENTIAL: MEDICAL CONDITIONS / ALLERGIES / DETAILS	

PRIVACY STATEMENT

All CONFIDENTIAL and MEDICAL information supplied on this form will be entered into a database for the purposes of managing the bay to Birdwood and will only be disclosed to third parties in the event of the need / perceived need for medical intervention or assistance.

* SIGNED:	*DATE:	
UNDER 18 Yes / No (If U18 a Parent/Guardian Declaration must be signed.)	OFFICAL USE ONLY	DATE RECEVIED: