

Volunteer Registration Form

Personal Details								
Name:				Phone:				
Email Address:								
Resider	itial Address:							
T-shirt S	Size							
	Xtra Small Xtra Large		Small 2XL		Medium		Large	
Emergency Contact Name:			Pho	Phone:				
Mobile:			Relations	Relationship:				

Please outline any medical conditions that may affect your ability to perform volunteer tasks:

If you have volunteered previously, please outline any tasks that were performed:

Do you currently hold any of the following:

Full Driver's License

Working With Children Check \Box

First Aid Certificate \Box

Food Handler Certificate

As a volunteer, I agree to the following responsibilities and conditions:

- 1. I have advised the Event Manager of any health considerations and allergies that may affect my ability to perform my role.
- I acknowledge that the tasks I undertake for the Tatura 200 Charity Bike Ride & Walk are done in a voluntary capacity and no employment relationship exists between myself and Tatura Milk Industries, therefore I will receive no remuneration for my volunteer service.
- 3. I acknowledge that I am not covered by WorkCover insurance, as I am not an employee.
- 4. I agree to work within the guidelines contained in my volunteer briefing document and will respect the supervision of Tatura Milk Industries staff or supervising volunteers.
- 5. I understand and agree that, in my capacity as a volunteer, I may encounter confidential and/or commercially sensitive information and that I will use all reasonable endeavors to protect this information from being disclosed to any person outside of Tatura Milk Industries. I will not make copies, notes or records of the confidential or commercially sensitive information and I will not divulge this information during or after the event has ended.

Volunteer Signature

Date