



Volunteer Application and Information Form

Contact Information of Volunteer

Name	
Street Address	
City, State, Postcode	
Home Phone	
Work or Mobile Phone	
Home Email Address	
T-Shirt Size	<input type="checkbox"/> Mens <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL <input type="checkbox"/> 5XL <input type="checkbox"/> Womens <input type="checkbox"/> 8 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 14 <input type="checkbox"/> 16 <input type="checkbox"/> 18 <input type="checkbox"/> 20

Motivation for Volunteering

Briefly tell us why you would like to volunteer with Black Dog Ride.

Availability of Volunteer

Please tick the times you could be available for volunteer projects.

- | | | |
|---|---|--|
| <input type="checkbox"/> Monday mornings | <input type="checkbox"/> Wednesday afternoons | <input type="checkbox"/> Saturday mornings |
| <input type="checkbox"/> Monday afternoons | <input type="checkbox"/> Thursday mornings | <input type="checkbox"/> Saturday afternoons |
| <input type="checkbox"/> Tuesday mornings | <input type="checkbox"/> Thursday afternoons | <input type="checkbox"/> Sunday mornings |
| <input type="checkbox"/> Tuesday afternoons | <input type="checkbox"/> Friday mornings | <input type="checkbox"/> Sunday afternoons |
| <input type="checkbox"/> Wednesday mornings | <input type="checkbox"/> Friday afternoons | <input type="checkbox"/> Anytime |

Interests of Volunteer

Please tick which volunteer areas interest you.

- Administration/National Office
- Local Community Projects
- Local Ride Coordination Team *If so, in what capacity:* _____
- Local Ride Coordinator *If so, which region:* _____
- Other. Please elaborate:

Skills or Qualifications of Volunteer

Summarise the skills, qualifications, certificates, and/or vehicle licences you have acquired from employment, life experiences or other activities, such as hobbies.

Previous Volunteer Experience

Summarise your previous volunteering experiences, if any.

--

Person to Notify in Case of Emergency

Name	
Street Address	
City, State, Postcode	
Home Phone	
Work or Mobile Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Equal Opportunity Statement

It is the policy of Black Dog Ride Australia to provide equal opportunities to all, without regard to race, colour, religion, national origin, gender identity, sexual preferences, age, or disability.