corrimaluniting.org.au
GROWING COMMUNITY AND CONNECTION FOR ALL

Corrimal Uniting Church - Volunteer Form

Details:

Name: …….

Preferred Name: ……*DOB: ……*Sex/Gender: ……

Address: ……..

…….. Postcode: …….

Phone: …… Email: ……

Emergency contact details:……

Volunteering:

I already/would like to volunteer in the following activity or activities (circle):

Op Shop Enz Meet Café Living English Classes

Community Garden Other: ……

Please give more information where applicable:

I have a particular role that I would like to volunteer in ……

……

I have a particular hobby, interest, skill that could be of use within this activity

……

……

***optional**

Permissions/Information

- I understand that photographic and/or video images of myself might be taken by Corrimal Uniting for use in digital and/or print media, for publicity and promotion purposes. I give permission for such images to be used for these purposes. **Yes / No*** (Circle)

  * Corrimal Uniting will do all that is possible to prevent your image from appearing without your permission. Please note that we have no authority over third parties or other attendees using your image, with or without your or our knowledge or consent.

- I understand and give my permission that my email address and/or phone number may be put on a list and used by Corrimal Uniting for communication purposes. (Corrimal Uniting will never forward or send any of your contact details to a third party, without prior permission from yourself). **Yes / No** (Circle)

- Do you have any pre-existing health conditions we should be aware of, that might affect you as you serve with us as a volunteer? **Yes / No**

  ……

Declaration:

- I declare there is no legal impediment to me volunteering with Corrimal Uniting.
- I am willing to attend a Volunteer Induction, am willing to volunteer within the mission of this organisation, the purposes of the activity I am volunteering in, and under the appointed leadership for that activity.

- I am willing adhere to the Volunteer Code of Conduct.

- I am willing to have required checks(e.g. Police, Working With Children) completed, and attend any relevant or required training (e.g. food handling, Safe Church.)

…….. ……

Signature Date

Office Use:

Interview : …… (date) Conducted by……

Induction: …… ….(date) Conducted by……

WWCC: …… Safe Church: ……

Read and sign the Volunteer code of conduct.

Date……. Verified by ……