

# VOLUNTEER REGISTRATION FORM



Whiteman Park is a recreation and conservation reserve spanning nearly 4,000 hectares of natural bushland. Our volunteer program is as vast as the Park itself, with opportunities in the following portfolios: *environment, transport heritage, visitor information, education and events*, working both internally and externally to the Park.

Volunteer activities range from taking guided walks and tours, assisting with school holiday and education programs, planting, weeding and manning our Visitor Information Centre. Being involved in these and many other activities at the Park is personally rewarding and mutually beneficial for the Park, our volunteers and the wider community.

If you are interested in joining our passionate and highly valued team of volunteers, please complete this form and return it to our Volunteer Coordinator for assessment.

## PERSONAL DETAILS

Title:  Mr  Mrs  Miss  Ms

Your Name:

Residential Address:

Suburb:

Postcode:

Home Number:

Mobile Number:

Email Address:

Date of Birth:

Driver's License:  Yes  No

Are you a permanent Resident of Australia?

Yes  No

## VOLUNTEERING PREFERENCES

Please identify which AREAS you are most interested in:

Visitor Information  Transport heritage  Environment

Please select which SPECIFIC ACTIVITIES you are most interested in:

Visitor Information Volunteering  Tour Guiding  
 Transport Heritage Collection Management  Conservation Support  
 Education Program Volunteering  Event Support

All Whiteman Park volunteers are required to obtain a **National Police Clearance Form** and a **Working with Children Check**, the costs of which will be reimbursed by the Park. A current form of identification will need to be sighted when you attend your interview and at least one of your referees provided will be contacted before that.



Lot 99a Lord Street Whiteman WA 6068  
Tel: (618) 9209 6000 Fax: (618) 9249 3510  
enquiries@whitemanpark.com  
www.whitemanpark.com  
ABN: 35 482 341 493

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## EMERGENCY CONTACT INFORMATION

Contact Name: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ After Hours Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

## AVAILABILITY - Please indicate which days / times you are available for volunteering

	MON	TUE	WED	THU	FRI	SAT	SUN
Morning							
Afternoon							

## HEALTH INFORMATION

Do you have any physical limitations or are you under any course of treatment, which might limit your ability to perform certain activities?  Yes  No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## REFEREES

Please provide the names of two people who would be willing to speak on your behalf. The referees may be friends, current or former employers, work colleagues or a neighbour etc.

REFEREE #1 Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Daytime Phone No.: \_\_\_\_\_

REFEREE #2 Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Daytime Phone No.: \_\_\_\_\_

## VOLUNTEER DECLARATION

I declare that the information provided in the above Registration Form to be true in all aspects.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**PRIVACY STATEMENT**  
In accordance with the Privacy Act all information collected is for the purpose of providing volunteer service only to assess your suitability for volunteer work at Whiteman Park. No personal information is used or disclosed to other parties. All information is securely stored. Statistical non-personal information may be used from time to time. The information you provide in this form is required for insurance purposes.



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