VOLUNTEER REGISTRATION FORM

Whiteman Park is a recreation and conservation reserve spanning nearly 3,700 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 tours, 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. The Park also requires volunteers for Bennett Brook Railway, Tractor Museum, Bus Preservation Society, Motor Museum of WA and Perth Electric Tramway Society.

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:			Mobi	le Number:				
EmailAddre	ess:							
Date of Birt	h:		Drive	r's License:	Yes	🗌 No		
Are you a permanent Resident of Australia?					🗌 Yes	No No		

Where did you hear about volunteering at Whiteman Park?

VOLUNTEERING PREFERENCES						
Please select which AREAS of the Park you are most interested in volunteering with:						
Bus Preservation volunteering	□ Tractor Museum volunteering					
Motor Museum volunteering	Tramways volunteering					
Railway volunteering	Whiteman Park volunteering					
Let us know which SPECIFIC ACTIVITIES interest you:						
Admin and marketing	Research	□ Visitor information roles				
	Tour guiding	Trades				
Outdoor environment roles	Other:					





233a Drumpellier Dve Whiteman WA 6068 Tel: (618) 9209 6000 enquiries@whitemanpark.com.au www.whitemanpark.com.au ABN: 35 482 341 493



WHITEMAN PARK CONSERVATION • RECREATION • EDUCATION

VOLUNTEER **REGISTRATION FORM**

EMERGENCY CONTACT INFORMATION

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							
	_						

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								

HEALTH INFORMATION

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.	

Name: ¥

REFEREE Relationship:

Daytime Phone No.:

- #2 Name:
- REFEREE 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.

> Email your completed form to enquiries@whitemanpark.com.au or drop it in to Whiteman Park Administration.