



Version No:	4.1
Issued:	September 2020
Next Review:	September 2023

VOLUNTEER REGISTRATION FORM

First Name:	
Surname:	
Date of Birth:	
Address:	
Contact Number Home:	
Contact Mobile:	
Email Address:	
Volunteer Organisation:	
Volunteer Task and Location:	
Emergency Contact Name:	
Emergency Contact Number:	
Emergency Contact Address:	
Drivers licence Number (if applicable):	

Clause:

I understand I have obligations under Council's Work Health Safety and Return to Work Policy, Council's Volunteer Management Procedure and Code of Conduct for Volunteers and will endeavour to:

- Take reasonable care of my own safety and that of others at work (Volunteering for Council)
- Use personal protective equipment in accordance with Council's established safe work practices
- Ensure that I am not, by the consumption of alcohol or drugs, in such a state as to endanger myself or others
- Raise any matter, which gives cause for concern with the Council Coordinator or volunteer's Site Supervisor
- Notify any hazard and report any injury to me or to others as soon as practicable to the Council Coordinator or volunteer's Site Supervisor.

I understand that if I use my private vehicle when performing my volunteer duties, it is my responsibility to advise my insurance company so that they can advise me of my coverage.

I understand that, if the nature of my volunteer work requires it, I might be subject to a police check.

I agree to my photo being used by Council for Social Media Purposes Yes No

Signed / Date:	
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Once completed, please return the completed form to council@cleve.sa.gov.au