



## VOLUNTEER APPLICATION FORM

CONTACT DETAILS			
First Name			
Last Name			
Membership Reference			
Address			
		Postcode	
Phone			
Email			
<b>Emergency Contact</b>			
<b>Emergency Contact Phone</b>	9		
	<del></del>		
SKILLS AND INTERESTS			
Qualifications			
(Please list)			
Previous Experience			
(Please list)			
Interests	☐ Canteen	☐ Coaching	☐ Data entry
(Please tick all that apply)	(food/drinks)	<u> </u>	•
	,		
	☐ Events	☐ Executive committee	☐ Finance
	(social activities)		(bookkeeping)
	,		1 0,
	☐ First aid	☐ Grants	☐ Marketing
	☐ Membership registration	☐ Social Media	□ Sponsorship
	☐ Team manager	☐ Umpire	☐ Uniforms
		_ <b>0</b> po	(merchandise)
	☐ Volunteer Coordinator		(IIIoioiiaiiaioo)
	Usualited Coolainate.		
	AVAILABILI	TY	
Days	☐ Monday ☐ Tueso	day 🗆 Wednesday	☐ Thursday
(Please tick all that apply)	☐ Friday ☐ Sature	day □ Sunday	
Time		-	
(Please list your available			
time)			
How many hours per			
week are you willing to			
volunteer?			

This Club Development Tool is a part of Logan City Council's Sport, Recreation and Community Toolbox. This Toolbox supports the sport, recreation and community organisations across the City to develop an active community, best equipped to manage their clubs and leased assets.

