

Westpac Rescue Helicopter Service



Hunter, Central & Mid North Coast Office: P.O. Box 230 New Lambton NSW 2305
Phone: (02) 4952 0000 Fax: (02) 4952 0055

Volunteer Application Form

- I would like to become a Support Group Volunteer and assist in raising money for my local Westpac Rescue Helicopter Service.
- I would like to join my local Westpac Rescue Helicopter Service as a Social Member and assist in fundraising when I am available and acknowledge that I am not always able to attend meetings.
- I am already a member but am updating my details.

Local Support Group:.....

First Name:..... Surname:.....

Address:.....

Suburb:.....Postcode:.....

Home Phone:..... Mobile Phone:.....

Work Phone:..... Email:.....

Male Female

Preferred method of contact (please tick) Phone Email

Drivers Licence Number:..... Expiry:...../...../..... DOB:...../...../.....

Shirt Size: Mens size: Ladies size:

Referees

Please provide the contact details of two people who are not family members and who are willing to act as referees for your chosen voluntary work position.

Referee 1
Name: Relationship: How long have you known this referee?years/.....months

Phone: Mobile: Email:

Referee 2
Name: Relationship: How long have you known this referee?years/.....months

Phone: Mobile: Email:

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Availability (please tick on or more):

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Weekends
- On Call
- Own Transport

What is your primary motivation for volunteering? (Please tick one box)

- Help others/give back to community
- Social interaction
- Gain work experience/reference
- Explore/engage in areas of interest
- Build confidence/self esteem
- Recommended by someone else
- Using skills/learning new skills
- Centrelink/Job Network referrals
- Make a difference
- To be active/keep busy
- Practising English

What skills, experience or qualifications do you wish to contribute to volunteering?:

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Medical Information:

The Westpac Rescue Helicopter Service has a duty of care to protect your health and/or safety while you are a volunteer. Your answers to the following questions will help meet our mutual needs.

Do you have an existing medical disability/condition/Injury?

- Yes
- No

If yes, please provide details.

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Do you take any medication that may affect your volunteering work?

- Yes
- No

If yes, please provide details.

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Declaration:

Whilst I am a registered volunteer for the Hunter Region SLSA Rescue Helicopter Service I agree to the following terms and conditions:

- I will meet all the requirements of me as outlined in the Volunteer Guidelines including all procedures for the Office of Liquor, Gaming and Racing.

Workplace Health and Safety Act 2011

- I have read and understood the information provided in relation to WH&S.
- When volunteering for the Hunter Region SLSA Rescue Helicopter Service, I will behave in a manner that maintains the health and safety of myself and others around me.
- I will report all WH&S incidences and concerns to the appropriate Support Group member or the Volunteer Coordinator.

Privacy Statement

Your privacy is our priority. Westpac Rescue Helicopter Service abides by the National Privacy Principles in all its dealings with members, volunteers and the public. The personal information you have provided will help us process you as a valued volunteer with our organisation and will be treated as confidential.

I have read and acknowledged the terms and conditions on the reverse side and ask you to consider my application for volunteering for the service.

Signed:

Print Name:.....Date:.....

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Office Use Only

- | | |
|---|---|
| <input type="checkbox"/> Added in Xpect | <input type="checkbox"/> Added to Rescue Mailing list |
| <input type="checkbox"/> Temporary ID card issued 3mths | <input type="checkbox"/> Uniform Issued after 3 mths |
| <input type="checkbox"/> Volunteer Guidelines issued and signed for | <input type="checkbox"/> Information for Volunteers issued and signed for |
| <input type="checkbox"/> Chairperson of Group notified | |