



### Volunteer details

What is the main volunteer focus of the organisation? (tick as many as appropriate)

<input type="checkbox"/> Food services	<input type="checkbox"/> Transport	<input type="checkbox"/> Leisure/ recreation
<input type="checkbox"/> Bushcare/ regeneration	<input type="checkbox"/> Community awareness and education	
<input type="checkbox"/> Other: (please specify)	<input type="text"/>	

### Volunteer Position

Position/ Positions available	Level of commitment (e.g. 1 day per week/ 5 hours per day)

Does your organisation have Volunteer Accident Insurance?  Yes  No

Does your organisation have Public Liability Cover?  Yes  No

### Signature

Signature:  Date:

Name:

Position in organisation:

### Lodgement of Form Options

Postal Address:	City of Canada Bay Civic Centre 1A Marlborough Street, Drummoyne, NSW 2047 Locked Bag 1470 Drummoyne NSW 1470	Email: <a href="mailto:council@canadabay.nsw.gov.au">council@canadabay.nsw.gov.au</a>
		Contact: 9911 6555
		Website: <a href="http://www.canadabay.nsw.gov.au">www.canadabay.nsw.gov.au</a>