



VOLUNTEER APPLICATION

Bounce Dementia 2019

in association



Bounce Dementia encourages the participation of volunteers to help us raise funds for Dementia Australia. If you are as passionate about supporting carers as we are, we encourage you to complete this application.

The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer role for you. Thank you for your support for Bounce Dementia.

Name:		
Address:		
Suburb:	VIC	Postcode:
Mobile:	Email:	

Any special talents or skills you have that you feel would benefit our event?

Interests: Please tell us which areas interest you the most

- Guiding and encouraging participants around the course
- Welcome / Registration
- Distribution to participants (t-shirts; basketballs; etc)
- Information and general customer service
- Fundraising
- Assisting sponsors and exhibitors
- Technology
- Set up / pack down / signage
- Post event activities

We generally require you to be available from 7am to 12pm on Friday 27th September 2019

Any physical limitations? _____

In case of emergency contact _____ Phone _____

Declaration:

As a volunteer of Bounce Dementia I agree to abide by all instructions given to me by the committee or authorised person. I understand that I will be volunteering at my own risk and that Bounce Dementia and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for Bounce Dementia. I am over the age of 18 and agree that all the work I do is on a volunteer basis.

Signed _____

Email your completed form to volunteering@bouncedementia.com.au