

*Name:	::	
*Addres	ess:	
*Suburb	rb: *F	Postcode:
Home T	Telephone: *N	Mobile:
*Email:	:	
* Shirt s	size (unisex) XS, S, M, L, XL, XXL, XXXL, XXXXL, XXXXXL	9XL
*Please	e outline your current or previous occupation/work experience	/volunteer work.
*What	t volunteer position(s) are you interested in? (tick relevan	nt boxes)
	Promotions Assistant (distribute flyers in shopping cen	tres libraries cafes etc.)
	General Event Assistant (help with set-up and pack-do	wn of event, including signage and gazebos.)
	Children's Activities Assistant (supervise craft activities required for volunteers.)	and games for kids. A Working with Children Check is
	Workshop Assistant (Provide assistance to workshop p	roviders)
	Stage Assistant (assist the MCs, coordinate performers Back Stage area)	, make sure groups arrive on time, ensure security of
	Information Tent Assistants (Provide information such sell promotional products and t-shirts and be responsible)	
	Waste & Recycling Heroes (Set Up Recycling Stations w friendly atmosphere of the Festival's food precincts by good order)	
*Why d	do you want to volunteer for the Africultures Festival?	
	ao you want to tolunteer for the Allieuteles restituti	
*What	t languages do you speak?	

*When are you available?

Hours:	Date			
Saturday 12 March 2016	☐ Other (please specify)			
☐ Morning (9am – 2.30pm) —				
☐ Afternoon (1.30pm -7pm) —				
Please note: Volunteers working over 4 hours will be provided with a lunch break and food voucher.				
*All volunteers will be required to attend an inc 44A Macquarie Road, Auburn .	duction. The induction will be held a	at Auburn Centre for Community,		
Please select the date/time you can attend.				
☐ 25 February 2016, 5:30pm − 8:30pm				
☐ 3 March 2016, 10:00am − 1:00pm				
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*Do you have (or have you had) a medical or health problem or other special consideration which may affect your volunteer work, or that we should know about in the event of an emergency?				
□ Yes				
□ No				
If you answered yes to the above question, please provide details of your medical condition:				
*Who should we contact in the event of an eme	ergency?			
lame: Relationship to you:				
Address:	Telephone:			
*Working with Children Check / Prohibited Employment Declaration				
All volunteers will working with, or in close proxi prohibited person. You will need to sign a Worki				
Signature:		Date:		
OR				
Name of Parent / Guardian (if under 16 years):				
Signature of Parent / Guardian (if under 16):	Date	:		

Some of the information that SWCA is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 ("PPIP Act"). The supply of the information by you is voluntary. If you do not provide the information SWCA may not be able to accept your application. SWCA has collected this personal information from you in order to consider your application for a volunteer position within CAC. The information will be retained by SWCA and stored in SWCA Central Data System and will not be made publicly available. You may make an application for access or amendment to your personal information. You may make a request that SWCA suppress your personal information from a public register. SCWA will consider any such application in accordance with the PPIP Act. SWCA is to be regarded as the agency that holds the information.

For further information contact Africultures Festival Committee on: 0407 904 526 or email info@africultures.com.au