



## VOLUNTEER REGISTRATION FORM 2018-19

WAYS AND WHEN TO HELP	
<b>On Shore</b> - Hook Café - Preparing Club boats for sailing - Returning Club boats to storage - Launching, retrieving of support boats - Results personnel (training provided)	Saturday AM Saturday AM Saturday AM Saturday AM or PM Saturday AM or PM
<b>On Water</b> - Skippering a support boat (qualifications needed) or crewing - Start boat personnel (training provided)	Saturday AM or PM Saturday AM or PM

VOLUNTEER 1			
First name	Surname	Sex	M      F
Address			
Email			
Phone (home)	Phone (mobile)	Working with Children Check (notice No.)	
Medical Information (any existing life threatening conditions)			
Next of Kin name	Relationship	Contact Number	
When and how you would like to help?			
Do you hold any of the following (please tick)			
<input type="checkbox"/> Senior First Aid	<input type="checkbox"/> Recreational Skippers Ticket	<input type="checkbox"/> National Power Boat Handling	
<input type="checkbox"/> Safety Boat Handling	<input type="checkbox"/> Radio Licence	<input type="checkbox"/> Food Safe	
<input type="checkbox"/> YA Dinghy Instructor	<input type="checkbox"/> Tackers coaching	<input type="checkbox"/> MOFSC accredited driver	

DISCLAIMER – VOLUNTEER 1	
<ul style="list-style-type: none"> <li>I am aware that Mandurah Offshore Fishing and Sailing Club boating events involve strenuous outdoor activities in which I may have had no previous experience and which may demand physical and mental effort in a variety of weather conditions and environments, which may result in physical tiredness.</li> <li>In case of injury or illness, I authorize Mandurah Offshore Fishing and Sailing Club to obtain any medical attention deemed appropriate, including ambulance or other rescue transport.</li> <li>I am aware that I shall not be under the influence of alcohol due to consumption prior to or during a period of volunteering and understand that the insurance cover shall become null and void.</li> </ul>	
Name	
Signature	Date
If volunteer is under 18 years of age a parent or guardian needs to sign as well as the volunteer	

VOLUNTEER 2			
First name	Surname	Sex	M F
Address			
Email			
Phone (home)	Phone (mobile)	Working with Children Check (notice No.)	
Medical Information (any existing life threatening conditions)			
Next of Kin name	Relationship	Contact Number	
When and how you would like to help?			
Do you hold any of the following (please tick)			
<input type="checkbox"/> Senior First Aid	<input type="checkbox"/> Recreational Skippers Ticket	<input type="checkbox"/> National Power Boat Handling	
<input type="checkbox"/> Safety Boat Handling	<input type="checkbox"/> Radio Licence	<input type="checkbox"/> Food Safe	
<input type="checkbox"/> YA Dinghy Instructor	<input type="checkbox"/> Tackers coaching	<input type="checkbox"/> MOFSC accredited driver	

DISCLAIMER – VOLUNTEER 2	
<ul style="list-style-type: none"> <li>I am aware that Mandurah Offshore Fishing and Sailing Club boating events involve strenuous outdoor activities in which I may have had no previous experience and which may demand physical and mental effort in a variety of weather conditions and environments, which may result in physical tiredness.</li> <li>In case of injury or illness, I authorize Mandurah Offshore Fishing and Sailing Club to obtain any medical attention deemed appropriate, including ambulance or other rescue transport.</li> <li>I am aware that I shall not be under the influence of alcohol due to consumption prior to or during a period of volunteering and understand that the insurance cover shall become null and void.</li> </ul>	
Name	
Signature	Date
If volunteer is under 18 years of age a parent or guardian needs to sign as well as the volunteer	

Please return this form to:

Waterbased Activities Team

[marinaadmin@mofsc.com.au](mailto:marinaadmin@mofsc.com.au)

[www.mofsc.com.au](http://www.mofsc.com.au)

PO Box 219 Mandurah WA 6210 | 115 Breakwater Parade Mandurah WA 6210 | 9535 6251