

MOVE THROUGH LIFE Volunteer Registration Form



Thankyou for registering your interest in volunteering with Move Through Life, any help is much appreciated. We will be in touch when projects that you're interested in start, to check your availability and interest.

This form can be filled in electronically. If you have any difficulties with this format please contact Chelsea Nickels via one of the methods indicated on the last page.

PERSONAL DETAILS

First Name			
Surname			
Address			
			Postcode
Phone	H	W	M
Email			
Emergency Contact	Name:	Phone:	

Do you have any medical conditions, limitations or dietary requirements (diabetes, back injury etc) that we should know about? *Please note this is an optional question, but information can help us when catering, heavy lifting, first aid requirements etc. to best accommodate your needs*

VEHICLE AVAILABILITY

<input type="checkbox"/> Your own transport	<input type="checkbox"/> Station Wagon
<input type="checkbox"/> 4 Wheel Drive	<input type="checkbox"/> Ute
<input type="checkbox"/> Trailer	<input type="checkbox"/> Vehicle with Tow ball
Other (that could be useful)	

TIME AVAILABILITY

<input type="checkbox"/> Weekends	<input type="checkbox"/> Weekday daytime	<input type="checkbox"/> Weekday evenings	<input type="checkbox"/> School holidays
<input type="checkbox"/> Other:			

SKILLS

<input type="checkbox"/> Administration	<input type="checkbox"/> Event management	<input type="checkbox"/> IT
<input type="checkbox"/> Writing skills	<input type="checkbox"/> Project management	<input type="checkbox"/> Typing
<input type="checkbox"/> Telephone skills	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Sewing
<input type="checkbox"/> Money management	<input type="checkbox"/> Public speaking	<input type="checkbox"/> Construction skills

PREFERRED PROJECTS / TASKS

<input type="checkbox"/> Set construction	<input type="checkbox"/> Backstage dresser	<input type="checkbox"/> Flier distribution
<input type="checkbox"/> Transportation	<input type="checkbox"/> Stage hand	<input type="checkbox"/> Booth attendance
<input type="checkbox"/> Costume making	<input type="checkbox"/> Lighting or sound tech	<input type="checkbox"/> Selling fundraising items
<input type="checkbox"/> Front of house	<input type="checkbox"/> Sausage sizzles	<input type="checkbox"/> Phone calls

Location of volunteer work

<input type="checkbox"/> Able to work from home	<input type="checkbox"/> Able to work away from home
<input type="checkbox"/> Prefer to work from home	<input type="checkbox"/> Prefer to work away from home

Please specify other skills or qualifications you have that may be beneficial
E.g. graphic design, event management, costume design, construction etc.

WHAT TASKS WOULD YOU NOT WANT TO BE INVOLVED IN?**ADDITIONAL COMMENTS**

Please list any comments you may have that do not fit under the above headings

THANK YOU FOR YOUR SUPPORT**Queries**

Chelsea Nickels, Volunteer Coordinator

chelsea.nickels@movethroughlife.org.au, 0421 487 938

Please return this form

to confirm your support as a volunteer,
preferably by email to chelsea.nickels@movethroughlife.org.au
or by post to PO Box 875, Brighton SA 5048