



Qld Flood Relief - BlazeAid – First Day Volunteer Registration

Vol No. _____

Please complete this form clearly in **BLOCK LETTERS**

Date: / / 20		Driver's Licence No:		Vehicle Reg:	
First Name:		Surname:		Age:	
Address:				Postcode:	
Mobile No:		Email address:			
Previous BlazeAid Volunteer? Yes / No	Which Camp(s)?				
How did you hear about this Camp?		Emergency Contact name, phone number and relationship. (If you're a couple – do not nominate each other)			
Relevant Rural Skills: (Please circle) Farming Fencing Chainsaw Tractors Irrigation Machinery Stock Cattle Sheep Mustering Horses Other – please list:					
Other Skills: (Please circle) Teaching Nursing Plumbing Carpentry Electrical Welding (MIG Y / N) Mechanical Gardening Child minding Sewing Painting Cooking Cleaning General Handy(wo)man Other – please list:					
Do you have a dog travelling with you? Y / N			Is your van fitted with shower and toilet? Y / N		
MEDICAL. <u>You will need to have sufficient medication with you</u> as you may be living and working in a remote area where medical assistance is not readily available? Do you suffer any physical conditions, e.g. chronic back injury, recent surgery, previous stroke or heart attack, etc., that may restrict your volunteering capacity.					
In which direction will you travel when you finish with BlazeAid?			How long do you have to volunteer with BlazeAid?		