



maitland events
city council

Volunteer Application Form



APPLICANT DETAILS

Persons must be aged 14 years and 9 months or older to be eligible to apply.

NAME: _____

DATE OF BIRTH: _____

POSTAL ADDRESS: _____

TOWN/CITY: _____

POSTCODE: _____

PHONE: _____

MOBILE: _____

EMAIL ADDRESS: _____

PREFERRED CONTACT METHOD:

Email Phone call Text Letter

IF APPLICABLE, LIST THE SERVICE CLUB THAT YOU ARE VOLUNTEERING ON BEHALF OF: _____

EMERGENCY CONTACT

NAME: _____

CONTACT NUMBER: _____

VOLUNTEERING DETAILS

HAVE YOU VOLUNTEERED FOR MAITLAND EVENTS PREVIOUSLY? Yes / No

DO YOU HAVE A MAITLAND EVENTS VOLUNTEER SHIRT? Yes / No

IF NO, CIRCLE YOUR SHIRT SIZE.

S M L XL 2XL 3XL 4XL 5XL

DO YOU HAVE A MAITLAND EVENTS VOLUNTEER BUCKET HAT? Yes / No

DO YOU HAVE A CURRENT CERTIFICATE IN ANY OF THE FOLLOWING? (PROVIDE COPIES WITH YOUR FORM):

- RSA
 Working with children check

DO YOU HAVE ANY MEDICAL CONDITION/S THAT WE SHOULD BE AWARE OF? Yes / No

Please detail _____

FIRST TIME VOLUNTEERS

Please be aware that no previous experience is required. The following questions are used as a guide for the events team to place volunteers in the most appropriate roles based on their previous experience.

FESTIVAL/EVENT: Yes / No

Please detail _____

CUSTOMER SERVICE: Yes / No

Please detail _____

CASH HANDLING: Yes / No

Please detail _____

SALES: Yes / No

Please detail _____

AVAILABILITY

Please tick all appropriate boxes.

MAITLAND RIVER REGATTA

Thursday 26 Jan - am pm all

SUMMER PROGRAM

Whole month of Jan - am pm all

HUNTER VALLEY STEAMFEST

Saturday 29 Apr - am pm all

Sunday 30 Apr - am pm all

MAITLAND TASTE

Friday 19 May - pm

Saturday 20 May - am pm all

Sunday 21 May - am pm all

MAITLAND AROMA

Saturday 12 Aug - am pm all

Sunday 13 Aug - am pm all

RIVERLIGHTS MULTICULTURAL FESTIVAL

Saturday 7 Oct - am pm all

BITTER & TWISTED

Saturday 4 Nov - am pm all

Sunday 5 Nov - am pm all

NEW YEAR'S EVE

Sunday 31 Dec - am pm all

THE LEEVE ACTIVITIES

Ongoing dates - am pm all

A Maitland Events staff member will contact you closer to each event to confirm details.

Shifts may be available pre and post event, if you are interested, please let the staff member know.

Event information provided may be subject to change.

PRIVACY AND PERSONAL INFORMATION

Council is committed to privacy protection and complies with the Privacy and Personal Information Protection Act 1998 and Government Information Public Access Act 2009.

The Maitland City Council Privacy Management Plan can be found online at: <https://www.maitland.nsw.gov.au/document/privacy-management-plan-0>

The personal information collected on this form will be used to provide contact information and determine appropriate work and safety environments to perform volunteer functions. The intended recipients are Maitland City Council Events team or other Maitland City Council staff and their contractors as required.

The supply of this information is voluntary, though Council will be unable to accept the application without it.



VOLUNTEERING CONDITIONS

I agree to act as a volunteer on behalf of Maitland City Council. I understand that if I am accepted as a volunteer I will be required to attend a compulsory Volunteer Induction training session where I will receive the Festival Volunteer Manual and that I will be required to comply with all conditions outlined in the training / manual. I understand that upon receipt of the training / manual if I am unable or unwilling to comply with all conditions that I can choose to withdraw my application.

Personal information obtained from volunteers by Council is governed by the Privacy and Personal Information Protection Act 1998 (PPIPA).

This legislation provides direction for the collection, protection, storage, disposal, access and use of personal information by Council.

If you are volunteering to work with the elderly, people with disability, youth and/or children, you may be required to consent to Council undertaking a criminal record check. Are you willing to give permission to undertake the check?

YES / NO

SIGNATURE: _____ **DATE:** _____

If you are under the age of 18 years you must have a parent or guardian sign the application form below to advise that they are aware of your application to volunteer with Maitland City Council:

SIGNATURE OF PARENT/GUARDIAN: _____

PRINT NAME: _____ **DATE:** _____



PLEASE RETURN COMPLETED FORM TO:

Maitland Events

PO Box 220, Maitland NSW 2320

f 02 4936 6483 | **e** events@maitland.nsw.gov.au | **t** 02 4931 2801 (for more information)