



2016 Adelaide Thunderbirds & Netball SA Volunteer Application Form

Volunteer Position :

1. Personal Details

Name:	
Address:	Post code:
Phone No. (Home):	Phone No. (Mobile):
DOB:	Email:

2. Next of Kin (in case of emergency)

Next of Kin:	
Relationship	
Daytime Phone No:	After hours Phone No:

3. Health Information

Do you have any physical limitations or are you under any course of treatment, which might limit your ability to perform certain types of activities?	Yes	No
If yes Please specify:		

4. Qualifications and Experience

Please list any qualifications or experience relevant to the volunteer position you wish to apply for:
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5. Referee Details (Can be personal or professional)

Referee:	
Daytime Phone No.	Afterhours Phone No:

6. Declaration

I confirm that the information provided in this application form is correct to the best of my knowledge. I acknowledge that I have read and agree to the relevant Position Description and agree to be bound by all Netball SA policies and procedures:	
Signature:	Date: