



Eaglehawk Dahlia & Arts Festival Inc.  
Volunteer Registration and Declaration Form

<b>Name</b>	
<b>Mobile/Phone</b>	
<b>Address</b>	
<b>Email</b>	

The Dahlia and Arts Committee offers you its thanks for offering your services as a volunteer, for the period from \_\_\_\_\_ to \_\_\_\_\_.

As a volunteer the following conditions apply:

1. No payment will be made to you.
2. The task you have volunteered for is: \_\_\_\_\_
3. Your Manager/Liaison Officer  
is: \_\_\_\_\_ Phone \_\_\_\_\_
4. Only while you are assisting the Committee in the above mentioned clearly defined activity, and while your assistance is approved/controlled and/or known by the Committee, you will be covered for Public Liability Insurance.
5. Should any injury occur to you while you are acting as a volunteer of this committee you must notify your Manager/Liaison Officer immediately, or as soon as practicable.
6. Any incident that occurs in which injury or property damage to other parties may arise must be reported immediately or as soon as practicable to your Manager/Liaison Officer.
7. Under the terms of the Occupational Health and Safety Act 2004, you must follow all established practices, procedures and instructions of the Committee, which apply to the tasks you have volunteered to perform.
8. You are expected to perform the task you have volunteered to perform with all due care, skill and diligence.
9. I have read the Code of Conduct on the Dahlia and Arts website (eaglehawkfestival.org.au) and agree to adhere to its terms.
10. I've read and understand the above conditions and declare that I sign this form voluntarily.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Manager/Liaison Officer \_\_\_\_\_ Date \_\_\_\_\_

*(Please fill out the appropriate field below)*

Working With Children Check	Victorian Institute of Teaching
Card No:	Card No:
Expiry Date:	Expiry Date: