



ABN: 90 225 949 103

Shop 10/15 Main Street. Tamborine Mountain. Qld 4272

Bookshop Volunteer Registration Form...

The information collected will be used for record keeping purposes and to promote the safety of all volunteers and visitors to the Piccabeen Bookshop and shed sites. This information is not given to other organisations or government agencies for any reason without your express consent. The data will be safely kept within the offices of Tamborine Mountain Landcare. It is your responsibility to update your record should your circumstances change by contacting the bookshop manager.

Name _____

Address _____

Phone: Landline _____

Mobile _____

Email _____

EMERGENCY CONTACT

Name _____

Relationship (e.g. parent/partner) _____

Phone: (Home) _____

(Business) _____ (Mob) _____

In order to determine what tasks may be allocated to you, are there any pre-existing medical conditions or special needs that may impact on your ability to undertake certain tasks? e.g. previous back injury, heart conditions, medications that may restrict your ability to perform certain tasks etc.

As a volunteer I understand that I have a legal obligation to take responsibility for, and be aware of my own safety and the safety of all others at the bookshop or book storage shed. I also agree that if I should identify potential hazards I will make every effort to communicate the condition of this risk to the bookshop manager and other volunteers. I agree that I will only undertake tasks that I myself assess that I am capable of completing safely and with minimal risk to myself and others. Furthermore I acknowledge that in the event of any accident which requires subsequent medical attention all costs will be covered by public medical services or my own private health cover and that Tamborine Mountain Landcare Inc. has no responsibility for any costs other than those that are covered by the insurance provided by the Queensland Government through Queensland Water and Land Carers details of which are provided on the QWaLC web site. <http://qwalc.org.au/qwalc-insurance> It should be noted that this does not cover medical gap costs.

Signed: _____

Date: _____