Friends Group

VOLUNTEER WORKDAY REGISTRATION FORM

For all Coordinators organising work on a City of Kalamunda reserve

Reserve _____ Date _____

To ensure every volunteer working on a Friends Group reserve is covered by the City of Kalamunda's Volunteer Insurance each individual (or the adult providing their supervision, if volunteers are under 18 years) must fill in the details below.

This register also provides a record of the amount of volunteer work done at each Friends Group reserve and as a record of permission for the City of Kalamunda to use any photographs taken during the event for promotional purposes.

Please indicate your photographic approval in the space provided below.

Volunteers Details and Photographic Permission

Name	Activity	Start	Finish	Photo Consent
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐
				Yes ☐ No ☐

Friends Group Coordinators,
please return a copy of this form as soon as possible to

City of Kalamunda

Parks & Environmental Services
Post: City of Kalamunda, PO Box 42, Kalamunda WA 6076
Email: environment@kalamunda.wa.gov.au