



## VOLUNTEER APPLICATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Occupation \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Availability (days and times from and to) \_\_\_\_\_

Do you have your own transport? \_\_\_\_\_

How did you hear of us? \_\_\_\_\_

### Volunteer work available: (please circle what would interest you)

Puppy Raising      Relief Puppy Sitting Demonstrations      Fundraising Committees

Special Events      Administration

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

**Please post to: Assistance Dogs Australia  
PO Box 455, Engadine NSW 2233  
or Fax: (02) 9548 3766, Tel: (02) 9548 3355**

### Office Use Only

I.D. NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTACT MADE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

*All applicants have the right to expect personal information will be treated with respect and remain confidential. Assistance Dogs Australia complies with the NSW Privacy and Personal Information Act 1998.*