



BRISBANE WATER (NSW) LEGACY CLUB
VOLUNTEER NOMINATION FORM

FULL NAME		
ADDRESS		
SUBURB		
EMAIL		
PHONE	(H)	(M)
PREFERRED METHOD OF CONTACT	PHONE / MOBILE / EMAIL	

DRIVERS LICENCE # (please provide copy)	
POLICE CHECK #	
POLICE CHECK EXPIRY DATE	
WORKING WITH CHILDREN CHECK #	
WORKING WITH CHILDREN CHECK EXPIRY DATE	

EMPLOYMENT BACK GROUND
VOLUNTEER EXPERIENCE
HOW WOULD YOU LIKE TO HELP?
YOUR AVAILABILITIES

**Please complete form then email to legacy@bwlegacy.com.au
or print then post to PO Box 4252, East Gosford, NSW, 2250**