

EFA NSW VOLUNTEER DATABASE INFORMATION



NAME: _____

MALE / FEMALE: (please circle)

ADDRESS: _____

_____ **POSTCODE:** _____

HOME PHONE NO. : _____ **WORK PHONE NO.:** _____

MOBILE NO.: _____

EMAIL ADDRESS: _____

REGION OF NSW: _____

DISCIPLINE/S YOU WOULD LIKE TO VOLUNTEER FOR:

VOLUNTEER TYPE / SPECIALISED SKILLS? E.g. Penciller, Jump Judge, Ring Steward

EFA MEMBER NO. (If applicable): _____

ARE YOU WILLING TO TRAVEL OUTSIDE OF YOUR REGION TO VOLUNTEER? YES / NO

ARE YOU CONNECTED WITH ANY EFA NSW AFFILIATED CLUBS? (if so, which):

ARE YOU HAPPY FOR YOUR DETAILS TO BE GIVEN OUT TO OTHER CLUBS YOU ARE CONNECTED WITH LOOKING FOR VOLUNTEERS? YES / NO (please circle)

THANK YOU VERY MUCH FOR YOUR TIME AND YOUR CONTRIBUTION
TO EQUESTRIAN SPORT

VOLUNTEERS ARE IMPORTANT PEOPLE

PLEASE RETURN FORM TO EFA NSW PO BOX 7077 WETHERILL PARK BC 2164 or
via fax on 02 9620 2260 or via email to susie@efansw.com.au