

2020 Rockhampton Agricultural Show Volunteer Application Form



Privacy Notice: Council deals with your personal information in accordance with law including the *Information Privacy Act 2009*.

This form is to be completed when applying to volunteer for the 2020 Rockhampton Agricultural Show. Submitting this form does not guarantee a volunteering position. Applicants will be required to attend a face to face-interview. Refer to the Volunteer Policy and Procedure for further information.

P: 07 4932 9000 | **E:** show@rrc.qld.gov.au | **W:** www.rockyshow.com.au | PO Box 1860 Rockhampton QLD 4700 | **ABN:** 59 923 523 766

In mid-June, Rockhampton holds its annual Agricultural Show located at the Rockhampton Showgrounds. If you have an interest in arts, events, agriculture, horticulture and/or photography, we'd love for you to join our team. We are looking for volunteers to assist as ushers, liaisons, information booth attendants, date attendants, administration assistants and everything in-between. Please find further information at www.rockyshow.com.au.

Applicant Details			
Applicant name:			
First		Middle	Last
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify):			
Date of birth:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Residential address:			
Street number and name		City	State Postcode
Postal address (if different):			
Preferred contact number:		Email:	
Previous Show Volunteer Work			
Year:	Description of tasks:		
Year:	Description of tasks:		
Year:	Description of tasks:		
Preferred Volunteer Work			
Please indicate if you have an exhibit section preference:			
<input type="checkbox"/> Apiculture	<input type="checkbox"/> Arts & Crafts	<input type="checkbox"/> Fine Arts	
<input type="checkbox"/> Cookery & Cake Decorating	<input type="checkbox"/> Caged Birds	<input type="checkbox"/> Poultry	
<input type="checkbox"/> Commercial Cattle	<input type="checkbox"/> Stud Cattle	<input type="checkbox"/> Horse	
<input type="checkbox"/> Horticulture	<input type="checkbox"/> Photography	<input type="checkbox"/> Schools	
<input type="checkbox"/> Woodchop	<input type="checkbox"/> Other:		
Emergency Details			
Emergency Contact One			
Contact name:			
First		Middle	Last
Residential address:			
Street number and name		City	State Postcode
Preferred contact number:		Alternative contact number:	

Emergency Contact Two			
Contact name:			
First	Middle	Last	
Residential address:			
Street number and name	City	State	Postcode
Preferred contact number:		Alternative contact number:	
Medical Details <i>(some positions require that your supervisor has evidence of your physical capacity to undertake certain jobs e.g. driving vehicles, lifting items, electrical testing and tagging)</i>			
Are you physically able to undertake the nominated tasks?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, please provide details:			
Do you have any conditions which may impact your role as a volunteer that Council should be made aware of?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please provide details:			
Medical Practitioner			
Doctor's name:		Contact number:	
Address:			
Street number and name	City	State	Postcode
Declaration			
I acknowledge that I will adhere to the below conditions:			
<ul style="list-style-type: none"> ▪ I agree to the Rockhampton Agricultural Show Committee conducting probity checks (where appropriate). ▪ I agree to work under the guidance and supervision of the Rockhampton Agricultural Show Committee. ▪ I agree to contact a member of the Rockhampton Agricultural Show Committee if I wish to vary the nature of work specified in this application, or if I experience any problems with the work I am undertaking. ▪ I understand that as a volunteer I have the same responsibilities as an employee of Rockhampton Regional Council to comply with the Code of Conduct, relevant policies and legislative obligations of Rockhampton Regional Council particularly in respect to workplace health and safety, discrimination, bullying, confidentiality and organisational discipline. ▪ I understand that I am volunteering my services to Rockhampton Regional Council and will not receive remuneration for my services, and that I will inform the Rockhampton Agricultural Show Committee when I no longer wish to be considered for further volunteering activities. ▪ I understand that Rockhampton Regional Council may terminate my volunteering services if I do not comply with any aspect of this agreement. ▪ I agree to inform the Rockhampton Agricultural Show Committee of any injuries sustained whilst undertaking volunteering activities. ▪ I give permission for my photograph to be taken and reproduced in Rockhampton Regional Council publications, including on Rockhampton Regional Council's website and social media pages. 			
Name:	Signature:	Date:	
Declaration by Legal Guardian of Applicant (under 18)			
I declare that I am the legal guardian of the applicant and give consent for the applicant to volunteer at the Rockhampton Regional Council for the 2020 Rockhampton Agricultural Show as nominated on this form.			
Name:	Signature:	Date:	