**ilkurlka roadhouse Volunteer Application Form**

Please send the completed application form to:

[ilkurlka@spinifex.org](mailto:ilkurlka@spinifex.org)

PMB 8002

Kalgoolie

WA 6433

Phone 08 9037 1147

Fax 08 9037 1177

availability

|  |  |
| --- | --- |
| FROM: |  |

|  |  |
| --- | --- |
| TO: |  |

personal details

|  |  |
| --- | --- |
| NAME: |  |

Street Address:

|  |
| --- |
|  |

Postal address (if different):

|  |
| --- |
|  |

|  |  |
| --- | --- |
| PHONE: |  |

|  |  |
| --- | --- |
| EMAIL: |  |

Emergency contact

|  |  |
| --- | --- |
| NAME: |  |

ADDRESS:

|  |
| --- |
|  |

PHONE:

|  |
| --- |
|  |

Driving licence (please attach copy)

|  |  |
| --- | --- |
| EXPIRY: |  |
| CLASS: |  |
| STATE/TERRITORY OF ISSUE: |  |

criminal history check yes no

experience in 4wd yes no

basic mechanical knowledge yes no

experience in remote areas yes no

Qualifications

|  |  |
| --- | --- |
| first aid certificate |  |
| Chainsaw |  |
| forklift |  |
|  |  |
|  |  |
|  |  |

KNOWN MEDICAL CONDITIONS:

|  |
| --- |
|  |

other skills:

|  |
| --- |
|  |