



VOLUNTEER PROGRAM 2024/25 SEASON

Please Note: No passes will be sent out until this information is received.

FIRST NAME: _____ SURNAME: _____

DATE OF BIRTH: ____/____/____ GENDER: MALE / FEMALE

ADDRESS: _____
_____ POSTCODE: _____

EMAIL: _____ MOBILE: _____

EMERGENCY CONTACT:

NAME: _____

ADDRESS: _____

PHONE/MOBILE: _____ RELATIONSHIP: _____

PARTNER PASS:

ONE General Admission Pass (NOT PIT PASS) will be provided to your Partner when you are volunteering / working for the duration of the event. This pass (and yours) will be emailed to you to the email address above. This pass is for your partner / family member only. Passes aren't be given away or sold to other people. If this is abused, it will be revoked.

Name for Partner Pass: _____

CAR PASS:

ONE car passes will be provided so you can park in the bottom section of the pits (machinery end) ONLY if there is enough room. Car passes will be emailed with your entry ticket and must be shown to gate staff on entry to the venue. Everyone is required to stop at the pit gate, get out and sign in at the side window. If you have to re-enter the venue for any reason, you will be required to re-produce your car pass and armband.

Car Pass required: Yes No If yes, Rego number for Car Pass: _____

UNIFORMS:

It is a requirement of our Volunteers and Staff to wear provided Toowoomba Uniforms (usually a top or vest) while on duty. Black/Dark bottoms and comfortable flat filled-in shoes are recommended.

DECLARATION:

I understand the role is Voluntary, and no payments will be given. All voluntary roles can be terminated at any time at the discretion of the Management. I also agree to keep my uniform clean and well presented. I have answered all of the questions above honestly and completely, to the best of my knowledge and not misleading or deceptive. I understand that a medical opinion regarding my fitness to participate will be formulated based upon the answers I have provided and I consent to Speedway Australia and Toowoomba Speedway to form an opinion. I will advise Speedway Australia and Toowoomba Speedway if I suffer any condition, illness or injury which may affect my ability to participate as a Volunteer at the speedway. I will always abide by the Speedway Australia & Toowoomba Speedway Drug & Alcohol Policy.

SIGNED: _____ - Volunteer

If Under 18yrs - Parent / Guardian Signature: _____

Parent / Guardian Name: _____ Parent / Guardian Phone: _____

Please ensure you complete this form in full and provide all relevant information. Keep us up to date if any of your personal details change.