



Statewide
Wildlife Rescue Emergency Service Inc.

W.R.E.S.

Volunteer Expression of Interest

Please Note: Due to legal and insurance requirements, volunteers must be financial members of W.R.E.S. to participate.

I am a financial member of W.R.E.S. and would like to offer assistance as a volunteer to W.R.E.S. and am interested in the following areas: **(Please tick applicable)**

Actively with wildlife:

Rescue/Transport of animals Help at the W.R.E.S. Centre

I am available these days/hours

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I wish to help in other capacities:

- | | | | |
|---------------------------|--------------------------|---|--------------------------|
| Nesting box construction | <input type="checkbox"/> | Be part of the promotion and marketing team | <input type="checkbox"/> |
| Making Joey pouches | <input type="checkbox"/> | Attend promotion/information and Community events | <input type="checkbox"/> |
| Selling our merchandise | <input type="checkbox"/> | Help at major fundraising activities | <input type="checkbox"/> |
| Sell raffle tickets | <input type="checkbox"/> | Assist the newsletter and publications team | <input type="checkbox"/> |
| Make craft items for sale | <input type="checkbox"/> | Assist with administration | <input type="checkbox"/> |
| Strike plant cuttings | <input type="checkbox"/> | Assist the fundraising committee | <input type="checkbox"/> |
| Man sausage sizzles | <input type="checkbox"/> | | |

Name:

Address:

Town/City: State: Postcode

Phone: Email:

Date: Signed:

Please Mail to: Statewide W.R.E.S.Inc.
P.O. Box 120
Golden Square, VIC, 3555

Or
Email to: info@wres.org.au

Office Use Only
Member
Database
Contact