

# *Eurobodalla Access Radio Inc.*

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**EAR Inc.**  
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**WORKING TOGETHER FOR OUR COMMUNITY**  
Since 1981

## **Volunteer Application Form**



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mob: \_\_\_\_\_

Email Address: \_\_\_\_\_

Age Group:  Age (if under 18) \_\_\_\_\_  18-30 \_\_\_\_\_  30-55 \_\_\_\_\_  55+ \_\_\_\_\_

Occupation/ Former Occupation: \_\_\_\_\_

Next of Kin Name: \_\_\_\_\_

Next of Kin Address: \_\_\_\_\_

Next of Kin Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mob: \_\_\_\_\_

Do you own a computer? \_\_\_\_\_

What days/times are you available for? \_\_\_\_\_

Do you have any skills that could assist 2EARFM? \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please forward to: The Secretary  
Eurobodalla Access Radio  
PO Box 86  
Moruya NSW 2537