Name:

Address:

Mobile Phone:

Home Phone:

Email (please print clearly):

Occupation: ­­­­­­­­­­­ Age:

1. Tell me a little about why you wish to volunteer for Family Garden Time / Whanau Whanui:
2. Do you enjoy interacting with the public? If you have specific experience, please explain:
3. Which activity are you looking forward to the most on in Family Garden Time and why?
4. List three rules that you consider important to remember when supervising an activity?
5. Please indicate if you have any health concerns that I should be aware of ie allergic to bees (you will likely be outside for much of the day):
6. Any food allergies?

**Please fill out digitally and email to** **familyevents@aaf.co.nz** **Phone: 09 374 0331**