



Thank you for offering to be a Volunteer / Official on the Make Smoking History Targa West. Please fill in the form below and return to the Officials Coordinator, preferably by email or fax. A Postal address is also provided if required. All Officials will be required to sign the **CAMS Officials Sign-On & Disclaimer Sheet** either before or at the event. Any official under 18yo will need to bring with them a signed **CAMS Officials Under 18 Years Old (Parent-Guardian Consent)** form. Both above disclaimers can be found on www.targawest.com.au under the **Officials** tab and will be available at the event.

First Name		Home Phone	
Surname		Work Phone	
Address		Mobile	
Suburb / Town			
State / P/Code	/	Age if under 18	
Email			
T-Shirt Size	<input type="checkbox"/> XS <input type="checkbox"/> S M L <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL <input type="checkbox"/> 5XL		
CAMS Licence Details (if applicable):			
Licence No.		CAMS Categories	

PREFERRED DUTIES:

<input type="checkbox"/> Archway / Signage	<input type="checkbox"/> Road Closure **	<input type="checkbox"/> Tape & Tag Kalamunda
<input type="checkbox"/> Chicanes	<input type="checkbox"/> Scrutiny	<input type="checkbox"/> Tape & Tag Bullsbrook
<input type="checkbox"/> Regroups / Parc Ferme	<input type="checkbox"/> Spectator Marshal	<input type="checkbox"/> Tape & Tag Toodyay
<input type="checkbox"/> Results	<input type="checkbox"/> Stage Team	<input type="checkbox"/> General Duties
<input type="checkbox"/> Other (please specify):		
STAGE TEAM NAME:		
** OTHER OFFICIALS travelling with you:		

PLEASE INDICATE WHICH DAYS YOU WILL BE AVAILABLE

<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
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PREVIOUS YEARS EXPERIENCE

<input type="checkbox"/> 2006	<input type="checkbox"/> 2007	<input type="checkbox"/> 2008	<input type="checkbox"/> 2009	<input type="checkbox"/> 2010	<input type="checkbox"/> 2011	<input type="checkbox"/> 2012	<input type="checkbox"/> 2013	<input type="checkbox"/> 2014	<input type="checkbox"/> 2015	<input type="checkbox"/> 2016	<input type="checkbox"/> 2017
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EMERGENCY CONTACT

Name:	Phone:
Address:	Town / Suburb:

Please email or fax completed forms to: Email: officials@targawest.com.au

(or post to the address below)

Privacy Statement - All information provided to the organisers of Targa West is for administration and contact purposes only. All information will be held in confidence and NOT released to any third parties.

!! PLEASE ENSURE YOU SIGN THE CAMS DISCLAIMER BEFORE BEGINNING DUTIES ON THE RALLY !!