VOLUNTEER LEVY – APPLICATION FOR REIMBURSEMENT 2018

One form to be completed per registered player.

Submit to volunteers@gufc.org.au after completion of 5 hours of volunteer time to get reimbursement of your \$50 levy.

Approval must be sought from the relevant GUFC Representative for the work involved

PLEASE FILL OUT BOTH COLUMNS

Volunteer			Player a	t GUFC		
Name of volunteer:			of Player:			
FFA Number:			mber:			
Volunteer Activity: Age gro			Age gro	oup for 2018 season:		
Date(s) of volunteer Activity:			Name a	and Division of team:		
Completion of all 5 hours: YES / NO						
Contact details:					GAH	
WWVP Card Number:					6 Inner	
Bank Details:					UNITED	
Account name:						
BSB:				\ 	TOOK CLUB	
Account number:					PBALL	
Approval Required (choose one))					
		Canteen Manager			Events Coordinator	
,		Coach Coordinator Executive Member			Other:	П
Committee Chair	_	executive Member		_		_
Name of approver:	•••••					
Signature:						
FOR GUFC OFFICE USE ONLY						
Reimbursement approved by				YES / NO		
Reimbursement paid on (date)				YES / NO		
Amount paid				YES / NO		
Finalised and ready for file				YES / NO		