It is necessary for insurance purposes that a record of all volunteers supporting a FOTV event be kept. Please ensure each volunteer completes the details below when commencing/concluding their support at the event. A copy of this register is to be scanned and emailed to secretary@llv.community following the event.

**Event Name:** Click or tap here to enter text.

**Event Date:** Click or tap to enter a date.

**Event Location:**  Choose an item.

**Event Venue Name and Address:** Click or tap here to enter text.

**Volunteer Register coordinated by:** Click or tap here to enter text.

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| **Date** | **Volunteer Name** | **Contact Number** | **Sign in Time** | **Sign out Time** | **Signature** |
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