

Event Cover Application

Name	
Address	
Postcode	
Home Phone	
Mobile Phone	
Email Address	

Event Details

Address			
Postcode			
Date of Event			
Time Start		Time Ends	

Type of Event

Summarize the type of event you are holding and give a brief outline of special requirements

Name of Person to Notify in case of Emergency

This may be additional contacts

Name	
Address	
Postcode	
Home Phone	
Mobile Phone	
Email Address	



Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that should the event be cancelled or postponed I will contact LVFS immediately. There may be a cancellation fee charged in certain circumstances.

Name (printed)	
Signature	
Date	

Our Policy

Launceston Voluntary first-aid Service is a Voluntary organization and all its members are volunteers, these volunteers are either first aid (FAW) or support members.

These members have a lot of experience in the medical field, ranging from paramedic, nurses, physiotherapist with these skills allows us to provide a professional first aid service.

We are a non-profit organization who provides affordable first aid cover for local and community event. We can also provide a first aid training programme, this is strictly for local business and is part of our non-profit service.

Thank you for completing this application form and for your interest in asking us to provide First Aid cover with us