

FRIENDS OF THE DOLOMITES – Registration for voluntary work in summer 2023

Form fields signed with * are required fields

Title*: Mr. Ms. Nationality*:

Family Name*: First Name*:

Street*: Number*:

Postal Code*: Town*:

Telephone (mobile phone if possible)*:

E-mail*:

Date of birth (not younger than 18 years old)*:

Language skills*:

Special skills (e.g. first aid specialist etc.):

Driver's License: Yes No

Special requirements (e.g. diet, allergies, none, etc.)*:

Mountaineering experience*: Hiker Climber Guide none

Profession*:

Desired rota* (Rotation):

Rota 1:	<input type="checkbox"/>	Saturday, 08/07/2023 to Saturday 15/07/2023
Rota 2:	<input type="checkbox"/>	Sunday, 16/07/2023 to Saturday 22/07/2023
Rota 3:	<input type="checkbox"/>	Sunday, 23/07/2023 to Saturday 29/07/2023
Rota 4:	<input type="checkbox"/>	Sunday, 30/07/2023 to Saturday 05/08/2023

(Several cycles/rotas can be chosen)

Desired Position*:

Mountain Camp KLEINER PAL	<input type="checkbox"/>
Supervisor mountain camp KLEINER PAL	<input type="checkbox"/>
Support Personnel Base Camp HAUSALM	<input type="checkbox"/>
Supply Cable Car Machinist HAUSALM	<input type="checkbox"/>
Purchasing/Supply Resonnel HAUSALM	<input type="checkbox"/>

I understand that in special cases a short-term transfer to another position may be required, and I agree to these terms.

I'm arriving by*: car public conveyance other

Arrival time ca.*: o'clock

The Dolomitenfreunde association will provide accident insurance for you for the duration of your participation for summer camp 2020, in the event you are not covered by private insurance.

In the event that you have private accident insurance: I waive the accident insurance offered by the Dolomitenfreunde for the duration of my participation for summer camp 2020. Yes No

Next of Kin*:

Family Name*: First Name*:

Street*: Number*:

Postal Code*: Town*:

Telephone (mobile phone if possible)*:

E-mail*:

If this is the first time you are participating in our summer camp, where and how did you hear about us?

Notes and remarks:

By registering for voluntary participation in the FRIENDS OF THE DOLOMITES construction project, the applicant declares that he/she has read, understood and acknowledged the basic rules and safety instructions.

Please save the completed form on your computer and then send it to this e-mail address:
office@dolomitenfreunde.at