

## WWCV regular volunteer confirmation slip for season 20 / 20

- ☐ I confirm that I have been briefed on the safety procedures and I am aware of any hazards.
- ☐ I confirm that I will inform the task leader of any medical conditions.
- ☐ I confirm that I have registered with Wiltshire Wildlife Trust as a volunteer (if working on a WWT site).

Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Site \_\_\_\_\_

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