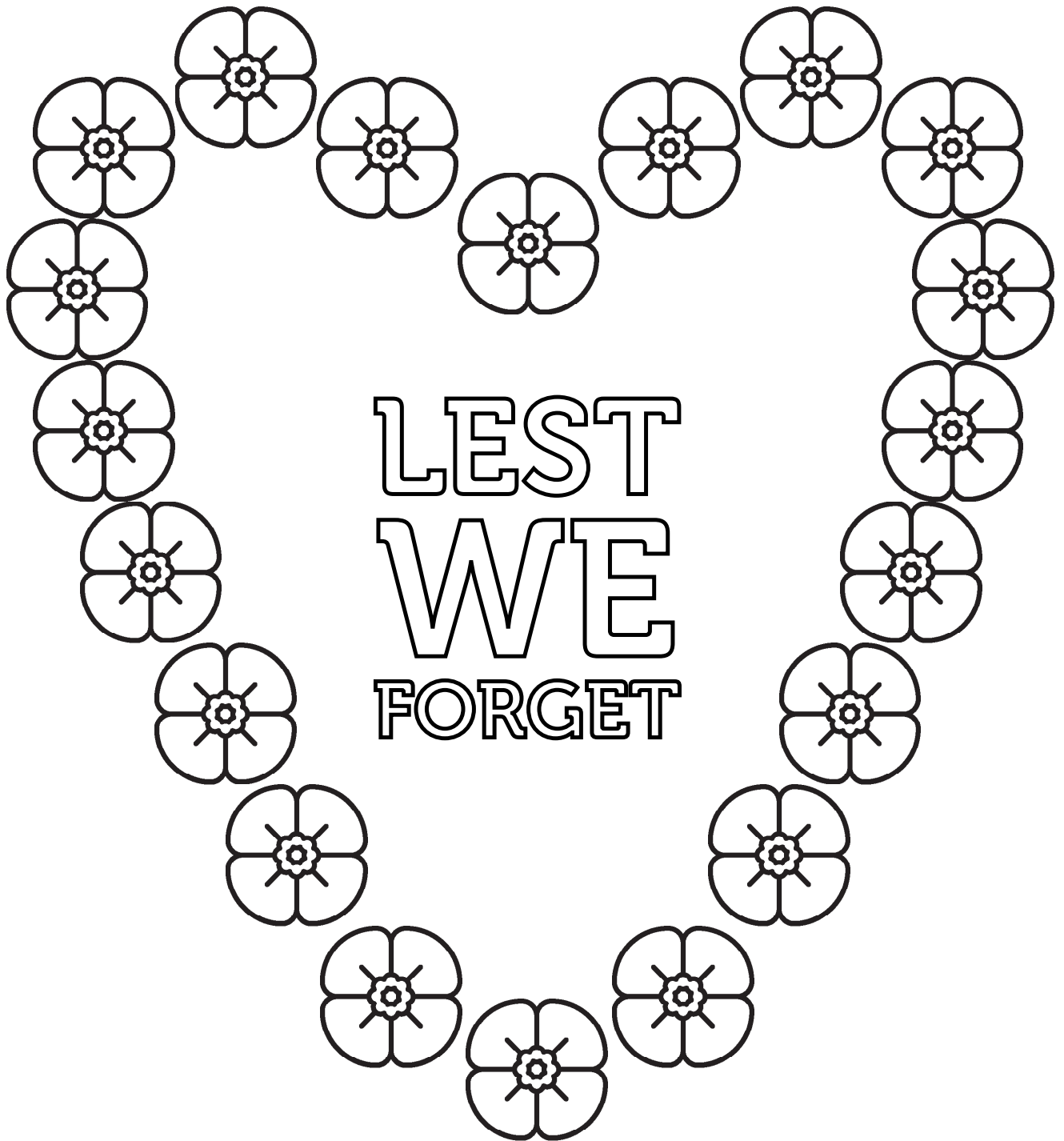


# ANZAC DAY



## My colouring competition entry details:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_



Please return your entry to:



# Want to feel **safer** and more **connected** to your community?

## Join Neighbourhood Support today!

Neighbourhood Support brings people and neighbourhoods together to create safe, resilient, and connected communities. We work to equip neighbourhoods to improve safety, be prepared for emergencies, and support one another so that our communities are great places to live. There is no cost to join and how/when you participate is completely up to you! Just fill in the details below and we'll be in touch!

### Contact Details

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Flat / Unit Number: \_\_\_\_\_ House Number: \_\_\_\_\_

Street Name: \_\_\_\_\_

Suburb: \_\_\_\_\_ Region: \_\_\_\_\_

Postcode: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

### Household Information

Names of Other Household Occupants: \_\_\_\_\_

I am interested in volunteering and would like more info:      [ Yes ]                      [ No ]

**Privacy Disclosure:** By completing this application you agree to have your information shared with your local Neighbourhood Support group / organisation including Coordinator(s) and Street Contacts who may contact you directly as needed through email and telephone communications. This information is collected and held in accordance with the Privacy Act 2020.