|  |  |
| --- | --- |
| Full name |  |
| Address |  |
| Postcode |  |
| Contact number/s |  |
| E-mail |  |
|  |  |
| Please tell us why you are interested in volunteering for *Thursday Friends & Food*. |
|  |
| Do you have any relevant skills, experience or qualifications?  |
|  |

|  |
| --- |
| Do you have any particular circumstances or health needs that we should be aware of? (We ask this so that we can best support you volunteering with us and any information will be treated in confidence.) |
|  |
|  |
| Are you happy for us to keep your details on record so that we can Yes/Nocontact you about volunteering? We will not pass these details on.  |
| How did you hear about volunteering for *Thursday Friends & Food*? |
|  |

Thank you for your interest and for completing this form.

Please return the form to:

Fr David Stephenson

Apartment 3
Holden Vale House
Holcombe Road
Helmshore BB4 4JR

frdavidstephenson@gmail.com