# Expression of Interest Form

**Name …………………………………….**

**Address …………………………………….**

**…………………………………….**

## Tel. No. …………………….….. Mobile No. ………..…………………… Date …../…../…..

**Email Address ………………………….@…………………………...…………**

### **Age group of Volunteer: Under 18 19-65 66-74 75+**

**Type of Voluntary Work: Please tick the help you might be able to give**

|  |  |
| --- | --- |
| **Shopping / errands / prescription collection** **Could be on foot or by car – which ever suits you** |  |
| **Lifts to/from hospital / clinic / doctor appointments**  **(you would need your own insured vehicle and valid driving licence** |  |
| **Befriending / sitting with someone** |  |
| **Small household jobs e.g. changing light bulbs, watering plants etc.** |  |
| **Minor indoor repairs / light DIY** |  |
| **Filling in forms (non legal) / writing letters** |  |
| **Gardening / lawn mowing/dog walking/other outdoor activities** |  |
| **Being part of the Phone Rota: matching callers to suitable volunteers**  **(can be done at home – or fitted around part-time employment or other activities)** |  |
| **Being part of the organising group – help with publicity,/fund raising etc,**  **(can be done evenings/weekends if working full time)** |  |
| **Other – please specify. Do you have any special skills to offer?** |  |

**Please return this form to any member of the Good Neighbour Scheme or email to:**

**Wilstead.Wixams.GNS@gmail.com**