

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?	



AVAILABILITY: Please circle potential times you might like to help

Mon	Tue	Wed	Thur	Fri	Sat	Sun	Varied
am	am	am	am	am	am	am	Please give indication below
pm	pm	pm	pm	pm	pm	pm	
evening	evening	evening	evening	evening	evening	evening	

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

Wilstead.Wixams.GNS@gmail.com