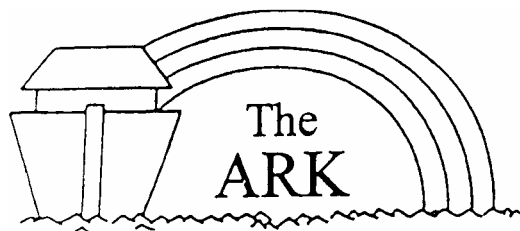


Please return this completed form to:
Wirral Churches' Ark Project
Mary Cole House 6, Sandford Street
Birkenhead Wirral
CH41 1BN
Tel: 0151 649 0111



Registered Charity No. 1079070

WIRRAL CHURCHES' ARK PROJECT

TITLE: _____ SURNAME: _____ FORENAMES: _____.

ADDRESS: _____.

_____ POSTCODE: _____ TEL: _____.

MOBILE TEL NO. _____.

EMAIL ADDRESS: _____ DATE OF BIRTH _____.

PREVIOUS EXPERIENCE: _____.

REFEREE NAME: _____ TEL: _____.

ADDRESS: _____.

_____ POSTCODE _____.

CAPACITY IN WHICH REFEREE KNOWN: _____.

I would like to volunteer for: (tick applicable option)

Cooking/kitchen 7.30 am – 9 am _____ Befriending 9 am – 1 pm _____.

Cooking/kitchen 6.30 pm – 9.30 pm _____ Befriending 7.00 pm – 10 pm _____.

I am prepared to commit myself to one shift per week yes/no (delete)

I cannot volunteer for kitchen or befriending work, but I am willing to help in the following areas:-

Administration : _____ Talks: _____ Fundraising: _____ .(tick any applicable option)

I confirm that the information given above is correct. I confirm that I will treat all information given by, or learned about, residents in strict confidence, except that I will pass information to Ark staff only. I understand that a Criminal Records Bureau search will be undertaken on me, and I give the Ark authority to undertake that search.

Under the Data Protection Act 1994, the Ark is obliged to inform you that the above information will be used to update our records. This information will be held on computer.

DATE: _____ SIGNATURE: _____.