

VOLUNTEER ENQUIRY FORM

IT'S ALL DONE WITH VOLUNTEERS!

YOUR DETAILS (please write in CAPITALS)

Title	First Name	Surname
Address		
		Postcode
Phone	Mobile	
Email		Date of Birth

GET INVOLVED

I am interested in volunteering in the following ways:

SALES TEAM <input type="checkbox"/> Charity Shop <input type="checkbox"/> Event Merchandise <input type="checkbox"/> Raffle & Tombola	PROMOTIONS OFFICER <input type="checkbox"/> Literature Distribution <input type="checkbox"/> Social Media <input type="checkbox"/> Schools Ambassador	OFFICE SUPPORT <input type="checkbox"/> Researcher <input type="checkbox"/> Mailshot Assistant <input type="checkbox"/> Gifts in Kind Finder
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We ask our volunteers to commit to a minimum of 2 hours per week between Monday and Friday, please indicate your availability:

MONDAY <input type="checkbox"/> am <input type="checkbox"/> pm	TUESDAY <input type="checkbox"/> am <input type="checkbox"/> pm	WEDNESDAY <input type="checkbox"/> am <input type="checkbox"/> pm	THURSDAY <input type="checkbox"/> am <input type="checkbox"/> pm	FRIDAY <input type="checkbox"/> am <input type="checkbox"/> pm
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Please tell us any other information you think we need to know:

PLEASE RETURN YOUR ENQUIRY FORM TO

Nicola Craine, Volunteering, Yorkshire Cancer Centre, Fundraising Department, Level 7,
St James's Institute of Oncology, Bexley Wing, Becket Street, Leeds LS9 7TF
Tel 0113 206 8620

HOW DID YOU HEAR ABOUT US?

<input type="checkbox"/> Leaflet	<input type="checkbox"/> Poster	<input type="checkbox"/> Newsletter	<input type="checkbox"/> YCC Website	<input type="checkbox"/> Charity Shop
<input type="checkbox"/> Member of Hospital Staff	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Family/Friend	<input type="checkbox"/> Other	

DATA PROTECTION INFO Yorkshire Cancer Centre will not pass your contact details to other organisations. If you do not wish to be added to our mailing list to receive news and updates, please tick the box: