



Registration Form for Volunteers

Full Name:..... Address:.....

.....

.....

Telephone(s):..... Email:.....

1. Please give an indication of the maximum number of hours you are willing to commit per month or indicate if this can be flexible:
2. Which days would you be available: M T W Th F Sa Su or flexible
3. Preferred way for us to contact you (please indicate): phone/email/no preference:
4. Please tick to indicate the support you would be willing to undertake below:

Support Offered	During Covid 19	Post Covid-19
Telephone Befriending		
Shopping/taking someone to shop		
Collecting parcels/prescriptions		
Dog Walking		
Driving – e.g. doctors/hospital appointment		
Basic DIY jobs within the home e.g. replacing lightbulbs		
Household jobs e.g. cleaning		
Hoovering/light cleaning		
Putting out bins/disposal of rubbish		
Light gardening		

5. Please give your consent for us to store this information by signing here:

Signature:..... Date:.....

6. Please email completed forms to: **goodneighboursrnpw@gmail.com** or send to:

**The Coordinator, The Good Neighbours-Rural Peterborough Trust,
c/o 27 High Street, Market Deeping, Peterborough PE6 8ED**

Good Neighbours Rural-Peterborough. Registered Charity: 1186197

c/o 27 High Street, Market Deeping, Peterborough PE6 8ED

All enquiries to Coordinator: Tel: 07735 810139 or email: enquiries@goodneighboursrp.org.uk

Website: <https://goodneighboursrp.org.uk>