

# Volunteer Application Form

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## Your Personal Contact Details



Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email: \_\_\_\_\_

## Emergency contact

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone number: \_\_\_\_\_

## Activities of interest: (please tick)

<input type="checkbox"/>	Administration
<input type="checkbox"/>	Events
<input type="checkbox"/>	Fundraising
<input type="checkbox"/>	Marketing, media and communications

Please return your completed form to [info@salford4good.org](mailto:info@salford4good.org) or Salford 4 Good,  
Salford CVS, The Old Town Hall, 5 Irwell Place, Eccles, M30 0FN  
Tel: 0161 787 7795