



## Volunteer Application Form

**Thank you for your interest in volunteering for Cornwall Air Ambulance Trust. Please fill in the form below and return to *Volunteering, Cornwall Air Ambulance Trust, Trevithick Downs, Newquay, Cornwall, TR8 4DY.* Alternatively you can apply online at [www.cornwallairambulancetrust.org/volunteer](http://www.cornwallairambulancetrust.org/volunteer)**

**Name:** .....

**Address:** .....

..... **Postcode** .....

**Telephone:** ..... **Email Address:** .....

**How would you prefer to be contacted?**       Phone       Email       Post

**I am interested in:** (please tick as many as you like!)

- Charity jar collecting
- Steward/information point at events
- Cheque presentation speaker
- Volunteering in the Charity HQ office
- Being an ambassador in my community/company
- Other (please specify) .....

**Volunteering at a shop (please circle from below):**

- |          |            |
|----------|------------|
| Penzance | Truro      |
| Saltash  | Wadebridge |
| Helston  | St Austell |
| Camborne |            |

**On Which Days Would You Like To Volunteer?**

Monday     Tuesday     Wednesday     Thursday     Friday     Saturday     Sunday

**Please add any other useful information about when you would like to volunteer:**

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**Do you have any skills you feel may be useful to us?**

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