

Community First New Forest

Booking Form

Course Title: Get Set For 2012 (volunteers and Funding)	Course Date: 1 st August 2011
Name and Job Title:	
Date of Birth:	
Organisation Name:	Address:
Telephone:	Post code:
Email address:	
Role in organisation: Trustee <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer <input type="checkbox"/> Other <input type="checkbox"/>	
Is your organisation a member of Community First New Forest? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Please give details of any special needs you have such as diet, wheelchair access, loop or signing, learning needs:	
What is your main reason for attending the workshop?	
What would you like to achieve from this workshop? Please state <u>at least 2</u> of your key objectives:	
What is your present level of knowledge about the course subject: None <input type="checkbox"/> Limited <input type="checkbox"/> Some <input type="checkbox"/> Good <input type="checkbox"/> Excellent <input type="checkbox"/>	
What other courses would your club attend? (Please tick any that apply):	
<input type="checkbox"/> Child protection	<input type="checkbox"/> Club Mark
<input type="checkbox"/> First Aid	<input type="checkbox"/> Generic Coach courses
<input type="checkbox"/> Disability Awareness	<input type="checkbox"/> Admin Skills

Please complete and return to:

Community First New Forest
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