



Volunteer Trustee Form

ASNA (Volunteer), Suite W-05, Windrush Innovation Centre, Howbery Park, Wallingford, OXON, OX10 8BA
info@asna.info | www.asna.info

Please complete this form IN BLOCK LETTERS or by computer and send to *ASNA (Volunteer Trustee), Suite W-05, Windrush Innovation Centre, Howbery Park, Wallingford, OXON, OX10 8BA* or send by email to info@asna.info. Please let us know if you require this form in an alternative format.

1. Your Details		
FULL CONTACT NAME		
FULL CONTACT ADDRESS		
COUNTY		
POST CODE		
CONTACT TELEPHONE <i>(INC. AREA CODE)</i>		
CONTACT MOBILE NUMBER		
CONTACT EMAIL ADDRESS		
I AM VOLUNTEERING AS: <i>(PLEASE SELECT)</i>	AN INDIVIDUAL	<input type="checkbox"/>
	A GROUP	<input type="checkbox"/>
	AN ORGANISATION	<input type="checkbox"/>
IF YOU ANSWERED GROUP ORGANISATION, PLEASE GO TO PART 2. IF YOU ARE AN INDIVIDUAL, PLEASE GO TO PART 3		
2. For Groups and Organisations.		

NAME OF GROUP OR ORGANISATION		
WE ARE: <i>(PLEASE SELECT)</i>	A PRIVATE SECTOR ORGANISATION	<input type="checkbox"/>
	A PUBLIC SECTOR ORGANISATION	<input type="checkbox"/>
	AN EDUCATIONAL ORGANISATION	<input type="checkbox"/>
	OTHER	<input type="checkbox"/>
IF YOU ANSWERED 'OTHER' ABOVE, PLEASE GIVE DETAILS:		
PLEASE TELL US HOW YOUR GROUP OR ORGANISATION COULD HELP US IN THE FIELDS OF CARING, ADMINISTRATION, TRUSTEES OR AS SUPPORTERS.		
3. For Individuals		
I AM: <i>(PLEASE SELECT)</i>	IN FULL-TIME EMPLOYMENT	<input type="checkbox"/>
	IN PART-TIME EMPLOYMENT	<input type="checkbox"/>
	A STUDENT	<input type="checkbox"/>
	RETIRED	<input type="checkbox"/>
	OTHER	<input type="checkbox"/>
PART 4 - TRUSTEES		

<p>HAVE YOU EVER BEEN A TRUSTEE OF ANOTHER CHARIRTY OR ORGANISATION BEFORE? IF YES, PLEASE GIVE DETAILS:</p>			
<p>WHAT SKILLS COULD YOU BRING TO THE TRUSTEES?</p>			
<p>HOW COULD YOU BE AN AMBASSADOR FOR THE CHARITY?</p>			
<p>Signed</p>		<p>Date</p>	

Thank you for filling out this form. Please now send to:
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 Howbery Park, Wallingford, OXON, OX10 8BA
 Or Email to: info@asna.info