

Your Details

Full Name: _____

Your Address: _____

Post Code: _____

Email: _____

Phone: _____

Church (optional): _____

Your Signature: _____

Date: _____

By signing this form you grant consent that CAP Malvern may contact you regarding your offers of help

Email Letter Phone

Please tick all that apply

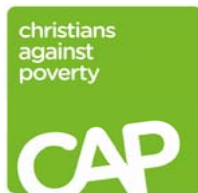
I would like to receive further updates on CAP Malvern by email

If at any time you wish to change your details, opt out of any of the above methods of contacting you, or withdraw completely then please contact the data controller for CAP Malvern. At present this is the Debt Centre manager:

Chris Mesley

chrimesley@capuk.org

Your privacy is important to us. We will not use your data for any other purpose than as you have consented.



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Helping

Could you help us as we launch CAP Malvern?

Praying

- Attending Regular Prayer Meetings
- Producing a Prayer Letter
- Organising Prayer Meetings
- Praying for Specific Needs

Fundraising & Publicity

- Organising Fundraising Events
- Preparing Flyers / Leaflets
- Distributing Posters
- Liaising with Local Media

Supporting Events or Drop-Ins

- Making cakes or meals
- Serving Refreshments

Church Liaison

- Promoting CAP in your church
- Coordinating Church involvement

Back Office & Administration

- Maintaining Website
- Donor Administration (eg Gift Aid)
- General Office Tasks

Befriending

- Visiting & Supporting Clients

Please complete your details overleaf

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