

REQUEST FOR ASSISTANCE

1	NAME		
2	Address		
3	Contact Details Tel:		
	Mobile:		
	Email:		
	VOLUNTEER CONTACT	MARION PRATT 01837 82285 clerkscpc@gmail.com	
4.1	Do you currently have anyone supporting you in your day to day living?	Yes	No
	If yes please give details		
4.2	Are you over 70?	Yes	No
4.3	Do you have a long term condition?	Yes	No
4.4	Are you Pregnant?	Yes	No
4.5	Do you have restricted mobility?	Yes	No
4.6	Do you live with anyone that has any of the above?	Yes	No
5.1	Do you have access to a computer	Yes	No
5.2	Are you on Facebook?	Yes	No
5.3	Are you following Sampford Courtenay Parish Page?	Yes	No
5.4	Have you checked out the advice on the SC resilience plan on how to prepare for an adverse event?	Yes	No
5.5	Are you signed up for our email service?	Yes	No
5.6	If not are you happy for us to sign you up using the email above?	Yes	No
5.7	If the answer for 5.1 is NO how would it be best to contact you?		
6.1	Are you happy to receive contact from a community volunteer?	Yes	No