



CCV Membership Application Please write clearly in upper case only.

Volunteer Contact Information

Full Name: _____ Today's Date: _____
First Last

Address: _____
Street Address

City Post Code

Phone: _____ Email: _____

CCV sends out a weekly email to keep volunteers informed about upcoming events. Please tick YES if you would like to sign up for the CCV weekly email. (You can unsubscribe at any time.)

Would you like to receive a weekly email about upcoming CCV events? YES NO

Emergency Contact Information

Full Name: _____ Date: _____
First Last

Phone: _____

This information will only be used in the unlikely event of an accident or emergency.

Programme and Newsletter

Every 3 months, CCV issues all its members with a programme of events and a newsletter with pictures and stories of the previous 3 months.

By selecting NO you will receive the programme and newsletter via email.

By selecting YES you receive a paper copy of the newsletter and programme in the post.

Regardless of what you choose, all members can access the current programme and newsletter online via the members' area on the CCV website. On receipt of this application you will receive your username and password.

Would you like to receive a paper copy of the programme and newsletter? YES NO

Postage

Please post this application along with a cheque for £6 to
CCV Membership Secretary
Jenny Jones
4 Montreal Close,
Glasllwch,
Newport,
NP20 3RD.

Declaration

*To maintain high standards of Health and Safety we require all volunteers to have read the **CCV Welcome Pack**.*

Sign below to acknowledge this:
