

'WHO WILL CARE?' AWARDS 2016

Individual Volunteer - Adult (aged over 18)

For volunteers aged 18+ who have demonstrated outstanding commitment within their community. This may be something they have done independently or in connection with a charity/community group or employer.

Your details:

I would like to nominate:

Name:	Name:
Address:	Address:
Telephone:	Telephone:
Email:	Email:

Describe the volunteering activity done by the nominee.

Who benefits from this activity?

What impact has this volunteering had?

Event Sponsors and Supporters



Continued overleaf

Over what period of time has this volunteering taken place / how many volunteering hours?

How has this person inspired you?

Additional information.

Please return this form by 5pm on Friday 9th April 2016 to:

CAVS
The Tyrells Centre
39 Seamore Avenue
Thundersley
Essex
SS7 4EX

Email: events@castlepointavs.org.uk

Event Sponsors and Supporters



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