



Moment Maker Application Form



Name _____



Age _____



Address _____



What area of Cornwall would you like to volunteer in?



Will you have a Personal Assistant with you?

☐☐

Do you need any equipment to help you in your placement?



What do you do like to do during the week?



Do you have any hobbies or interests?

Please post the completed form to:



**Marie Whitehurst
Moment Maker
Unit 1G
Guildford Road
Hayle
TR27 4QZ**



or email the completed form to:

marie@disabilitycornwall.org.uk

