

## Questionnaire for Volunteers

**Volunteers should NOT participate in the following circumstances**

- **If they, or a member of their household is currently unwell with symptoms of Coronavirus**
- **If they are vulnerable due to age or underlying health issues**
- **If they live with someone who is extremely vulnerable**

Name:

E-Mail:

Telephone Number:

With which tasks are you able to assist? (please tick)

Stewarding

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Daily cleaning, usually after the church is closed

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Are you over 70 and/or have underlying health conditions?

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Are you living with someone who is “clinically extremely vulnerable”?

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On which days could you assist?

Please state day and time: morning, afternoon, evening.

How often would you wish to assist?

Please state, once a week, more than once a week, more than twice a week.

Please confirm that do you **not** any allergies to latex or cleaning products?

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