



## Community Forum Questionnaire

The Data Protection Act requires that we get your written permission to share your information with others. Your information will be held on a secure web based data base and may be shared with Norwich & Norfolk Voluntary Services and Norfolk Rural Community Council unless you tell us not to. We do not sell or make our mailing list available to anyone. Individual information is simply passed to others needing an organisation's services. Please, therefore complete the following questionnaire and return it to our offices.

Name of Organisation: .....

Please indicate the type of organisation: Charity  Community  Statutory  Private  Other  explain \_\_\_\_\_

Address:.....

Telephone Number: ..... Fax:.....

Email address:..... Website: .....

Contact name: .....

1. Which of the following information on your organisation may we share?

Address	<b>Yes/No</b>	Email address	<b>Yes/No</b>
Telephone Number	<b>Yes/No</b>	Website Address	<b>Yes/No</b>
Fax Number	<b>Yes/No</b>	Contact Name	<b>Yes/No</b>

2. Would you like your organisation to be included in the Directory of Services?  
**Yes/No**

If yes please complete below which information you wish to be included

Address	<b>Yes/No</b>	Email address	<b>Yes/No</b>
Telephone Number	<b>Yes/No</b>	Website Address	<b>Yes/No</b>
Fax Number	<b>Yes/No</b>	Contact Name	<b>Yes/No</b>

3. If your organisation is a member of WNVCA and you wish to be listed on the WNVCA website, please complete below which information you wish to be included.

Telephone Number	<b>Yes/No</b>	Website Address	<b>Yes/No</b>
Email address	<b>Yes/No</b>		

4. If you would like your organisation to be listed in the Directory of Services, please supply one sentence describing your service.

.....  
 .....

5. We do not send any emails which require attachments as this caused a problem. The information sent out is generally that which we feel you need to know or may wish to act upon quickly. We would not be able to filter the subject matter.

If you have given us an email address do you wish to be on the stop press email list for important information? **Yes/No**

6. The newsletter is also available on our website [www.westnorfolkvca.org](http://www.westnorfolkvca.org), would you like us to send you an email each time the site has been updated? **Yes/No**

7. Do you wish to receive the newsletter by post? **Yes/No**

8. If you have not already done so would you like to register your organisation on our volunteering opportunities list?  
 If yes, we will contact you. **Yes/No**

9. If you have not already done so would you like to register your organisation on our list of Charities in need of trustees?  
 If yes, we will contact you. **Yes/No**

10. So that we can attempt to tailor our services to suit your needs, would you please indicate which group(s) of people your organisation supports. **Tick as many as apply.**

Black and Minority Ethnic People		Carers	
Children		People with Disabilities	
Families		Lesbian, Gay and Bisexual	
Homeless People		Lone Parents	
Older People		Offenders/Ex Offenders	
People in Debt		People on Low Incomes	
People in Residential Care		H.I.V/A.I.D.S	
People with Mental Illness		Refugees	
Asylum Seekers		Substance Users	
Travellers		Unemployed People	
Victims of Crime		Women	
Young People		Single Parents	

Other (please specify).....  
 .....

Signed: ..... Dated .....

Please return this questionnaire to: West Norfolk VCA, 16 Tuesday Market Place  
 King's Lynn, PE30 1JN. (Telephone 01553 760568)