**PaperGrrl Information Sheet**

Thank you for your interest in joining our team of PaperGrrls.

Can you please complete this short form and email it back to us? We will then be in touch with more information.

Thank you again!

Best wishes from the GWL Team.

**Contact details**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Phone number: |  |
| Mobile: |  |

|  |  |
| --- | --- |
| Do you have access to a well maintained bicycle? |  |
| How confident are you cycling on roads? |  |
| How confident do you feel cycling new routes? |  |
| Why are you interested in becoming a PaperGrrl? |  |
| What days and times would you be free to distribute the programmes? |  |
| Would you prefer to distribute programmes with someone else or go solo? |  |
| We currently distribute in the following 5 areas: Bridgeton/Duke Street, Shawlands, Govan, Woodlands/Byres Road and Finnieston. Do you have any preferences where you distribute? |  |
| Would you be able to collect programmes from GWL or would you prefer to collect them from somewhere else? If so where?  |  |
| Is there anything else you would like to tell us about? |  |

**Emergency contact details**

|  |  |
| --- | --- |
| Who should we contact in an emergency? |  |
| What is their relationship to you? |  |
| What are their daytime and evening contact telephone numbers? |  |
| Do you have any medical conditions or allergies we should know about? |  |