

# North Lancashire Counselling Service



## *friends of NLCS* Expression of Interest

### Personal Information

Your name:

### Contact details

Landline:

Mobile:

Email:

Postal Address:

### Your Interest

Please tick as many boxes as you feel relevant

- I have particular skills to offer (please tell us overleaf)
- I have resources or connections to offer (please tell us overleaf)
- I am interested in NLCS, but not sure how I might help at this point
- I would like to be on the Friends of NLCS email list
- I am interested in attending meetings
- I would like to make a financial donation (see overleaf)

Your Interest ...continued. *Optionally, please tell us about what you may be able to offer and anything else you would like to let us know. Continue on separate sheet if necessary.*

Please tick boxes and sign, giving permission for NLCS to

- keep my information on file     contact me at a later date

Signature:

Date:

Please send the completed form to:

The NLCS Management Committee,  
c/o. 12 Sulyard Street,  
Lancaster, LA1 1PX

*~ Thank you for your interest ~*

*If you would like to make a financial donation, please send a cheque made out to "North Lancashire Counselling Service" to the above address.*

Alternatively, direct bank payment can be made to:

"North Lancashire Counselling Service", The Co-operative Bank,  
Sortcode: **08-92-99**, Account Number: **65204252**  
(please let us know if you do this)