Catalyst Programme – Participant Application Form

*If you are interested in taking part in a forthcoming Catalyst programme, please complete the following application form and return to* [*becky.brookman@cuf.org.uk*](mailto:becky.brookman@cuf.org.uk) *or your Catalyst programme contact locally. If you are selected for the Catalyst programme, some information will be shared with trainers and other participants, other than that information which is identified as confidential below.*

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| **Your details** | |
| First Name |  |
| Surname |  |
| Postal Address |  |
| Phone Number |  |
| Email Address |  |
| Date of Birth |  |
| Age |  |
| Gender |  |
| Faith (if relevant) |  |

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| **Which Catalyst programme are you interested in taking part in?** | |
| Location |  |
| Dates |  |
| Are you able to attend all of the sessions? |  |

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| **What are your interests, hobbies, and achievements? How are you involved with your local community?** Please answer in less than 250 words. |
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| **Why do you want to take part in the Catalyst programme? Do you have any particular skills or talents that you would like to develop through participating in the programme?** Please answer in less than 300 words. |
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| **Please provide the details of a referee** | |
| Full Name |  |
| Email Address |  |
| Phone Number |  |
| Role/Position |  |

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| **Do you have any medical conditions, allergies, or needs? Do you have regular medication or treatment for any of these conditions? This information will be treated confidentially.** |
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| **Do you have any specific dietary requirements or food allergies?** |
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| **Do you have any specific accessibility requirements?** |
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| **Emergency Contact Details** | |
| Full Name |  |
| Phone Number |  |
| Alternative Phone Number |  |
| Relation to You |  |

|  |  |
| --- | --- |
| **Please provide your consent for:** | |
| I am willing to appear in photographs that may be used in promotional material by Catalyst and Near Neighbours | YES / NO |
| I am willing to receive marketing and promotional emails from Catalyst and Near Neighbours | YES / NO |

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| --- | --- |
| **I confirm that everything in this application form is a truthful representation of facts** | |
| Name |  |
| Signature |  |
| Date |  |

**If you are under the age of 18 at the time of applying, please ask a parent or guardian to fill out a separate Parental Consent Form.**

**What happens when I have sent my application?**

1. *Once we have received your application, someone will be in touch soon to confirm your place.*
2. *You will also be sent the Catalyst ground rules and values statement.*
3. *If you are not selected, you will be informed as soon as possible. We are always happy to have a chat if you have any questions.*