

**EXPRESSION OF INTEREST FORM**

Please fill in the application form and return it to: yab@saverauk.co.uk

**ABOUT YOU**

|  |  |
| --- | --- |
| **Full Name:** |  |
| **Date of Birth:** |  | **Age:** *(Savera UK Youth is ages 11-25 only)* |  |
| **Gender:** *(You can also add your preferred pronouns here)* |  |

**CONTACT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Address:** |  | **Postcode:** |  |
| **Contact Number:**  |
| **Are you happy to be contacted by the Savera UK Youth programme manager on the number given?** | YES [ ]  NO [ ]  |
| **Email Address:**  |
| **Are you happy to be added to our mailing list so you can be contacted about Savera UK Youth projects & Savera UK news?** | YES [ ]  NO [ ]  |

**INTEREST**

|  |  |
| --- | --- |
| **Where did you hear about us?** |  |

*(Tick all that apply)*

|  |  |
| --- | --- |
| **Would you like to be part of the Savera UK Youth programme and be part of future projects? Find out more:** <https://www.saveraukyouth.co.uk/youth-projects/>  | YES [ ]  NO [ ]  |
| **Would you like to be part of the Savera UK Youth Board? Find out more:** <https://www.saveraukyouth.co.uk/youth-advisory-board/> | YES [ ]  NO [ ]  |

|  |
| --- |
| **Why do you want to join the Savera UK Programme? (100 words max.)** |
|  |