



Please fill in this form and send it to the Manager, Lilliana Illes at the address below or email to [lilliana@claridgehousequaker.org.uk](mailto:lilliana@claridgehousequaker.org.uk)

Name:	
Address:	
	Postcode:
Email Address:	Telephone:
Local Meeting:	Area Meeting:
What attracts you about being a Friend in Residence at Claridge House? Continue on second sheet if necessary	
What gifts, skills and abilities do you feel you would bring to us?	

Anything else would you like to tell us?	
Please give two character references that we can follow up. One should be a Friend in the Friends Meeting you regularly attend	
<b>1 Name:</b>	
Email address	Telephone
<b>2 Name:</b>	
Email address	Telephone
I have read the role description and would like to be considered as Claridge House Friend in Residence	
signature	
Continuation space	