**\*NAME:
ADDRESS:
POSTCODE:
\*TELEPHONE
HOME  MOBILE ***Please indicate your preferred contact number by ticking the relevant box.*

**\*EMAIL:
DATE:**

**I WISH** to be part of the Community Champions initiative   *Please tick in the box.*

**I also wish** to receive information about, and consider becoming a:

**Tree Wardens YES**  **Park Champion YES ***Please tick in the relevant box.*

**Please sign in this box**

****

**Return to Susan Wyatt
Community Champions
Neighbourhood Governance Team
Ealing Council
5th Floor NE Perceval House
14 – 16 Uxbridge Road,
Ealing, London, W5 2HL**

**Or scan your signed and dated form and e-mail to:** **mywardmatters@ealing.gov.uk***Official use only*

|  |  |
| --- | --- |
| **Date received:** | **Checked by:** |
| **\*Community Champion #** | **Review date:** |

**\*These details will be available at ward forums to enable residents and councillors to contact you - unless you tick this box **