



Claridge House

for rest and renewal

Please fill in this form and send it to

the Manager, Liliana Illes at the address below or email to

liliana@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

1 Name:

Email address

Telephone

2 Name:

Email address

Telephone

I have read the role description and would like to be considered as Claridge House Friend in Residence

signature

Continuation space