## **Letter to GP to Inform of Volunteering**

| Date:   |   |
|---|---|
| Dear Dr,  |   |
| Re: (name of volunteer)   | Date of Birth:  |
| • • •   | ecome / is currently a volunteer car driver for Catholic Parish of a volunteer driver to get parishoners to mass or parish events if  |
| and may require assistance from the d below to reply to me , indicating whether | ge of 70 and many of the parishioners are older/ have disabilities river, I would appreciate you taking the time to use the form her you are aware of any health impediment which may volunteer driver. Please use the SAE enclosed?? |
| Yours sincerely,  |   |
| Zoff Stot   |   |
| Coordinator of the volunteers drivers   |   |
| I, the above mentioned au Guildford.  | uthorise you to give this information to the Guildford Parish of  |
| Signed:   |   |
| Print name:   |   |
|   |   |
| To: Zoff Stott, Volunteer Driver Coordin  | nator.  |
| Drive name:   |   |
| Address:  |   |
| (please tick )  |   |
| I am not aware of any health p  Duties as a volunteer driver .                  | roblems which will prohibit the above patient from carrying out   |
| I do not think that the above pa  | atient would be suitable asa volunteer driver.  |
| Signed:   | Date:   |