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| --- |
| **Personal Information** |
|  | **Full Name:** |
|  | **Address** |
|  | **Contact Number:****Day:** **Other:** |
|  | **Email:** |
|  | **Church:** |
| **If licenced Deanery:** |
| **If on placement please give Church:** |
|  |  |
| **GDPR Consent**I give consent to be contacted by | Email [ ]  Phone [ ]  |

[ ] I give consent for my personal information to be held electronically and in paper format by the Diocese of Bristol and used by the Spiritual Direction team for the purposes of linking you with a Spiritual Director.

This is in line with our GDPR policy which can be found at [www.bristol.anglican.org](http://www.bristol.anglican.org)

**Please return this form by email to Ruth Day at** ruth.day@bristoldiocese.org

Thank you