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**Community Expression of Interest Form**

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| Community / Club: |  |
| Host Group Name: |  |
| Contact Person Name:Tel:Email: |  |

Have you access to a local venue that could be used for meetings and tea/coffee prior to and after walks? (Please give detail).

Have any members of the host group experience of organising and/or leading group walks? (Please give details)

Are any of the group passionate about walking and/or interested in undertaking Walking Leader Training? (Please give detail).

 Are you aware of people within your community outside your group that have experience of organising group walks or who are passionate walkers? (Please give detail).

Any additional information: (consider; existing local walking routes, indication of level of physical activity within the target community etc.)

Indication of the number of participants expected for the initial week?

*Thanks you for your interest in this Programme. We will notify you as soon as possible to let you know if we will be able to work in your local community during 2017.*