

**PLEASE TAKE A FEW MINUTES TO FILL OUT OUR PANCREATIC CANCER VOICES  
EXPERIENCE FORM. PLEASE FILL IN YOUR DETAILS BELOW.**

### YOUR PERSONAL INFORMATION

Surname:

Name:

D.O.B:

Sex:

Telephone:

Mobile:

Email:

Address:

Town:

Postcode:

County:

Region:  South East,  South West,  East Midlands,  West Midlands,  
 North East,  North West,  Scotland,  Wales,  N. Ireland.

Local MP:

Local radio station:

Local/Regional newspaper:

Favourite magazine:

Local Celebrity:

**If you do not wish to answer a question, or do not have the information to do so please leave it blank.**  
Please note that this information will not be used in any way without your prior consent.

#### Information

Registered Charity Number 1112708

A Company Limited By Guarantee

Registered England No: 565804

#### Contact us

2nd Floor, Camelford House, 89 Albert Embankment, London SE1 7TW

Telephone: **0203 177 1686**

Email: **enquiries@pancreaticcancer.org.uk**

**PLEASE TAKE A FEW MINUTES TO FILL OUT OUR PANCREATIC CANCER VOICES EXPERIENCE FORM. PLEASE TICK THE RELEVANT BOXES TO CHECK THEM.**

**DO YOU WANT TO GET INVOLVED?**

Would you be willing to receive more information about Pancreatic Cancer UK?  Yes  No

Would you be willing to let us use your case history for information and publicity relating to Pancreatic Cancer UK?

- On our website  Yes  No
- In information pamphlets  Yes  No
- In press releases  Yes  No

Please note press releases includes ALL media purposes (print and broadcast).

Would you be willing to let us use your photo alongside your case history?  Yes  No

Would you be willing to receive information about attending Pancreatic Cancer UK events?  Yes  No

Would you be willing to receive information about becoming a fundraiser on our behalf?  Yes  No

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**PLEASE SEND US YOUR PHOTO AND THANK YOU FOR COMPLETING THIS FORM**

**YOUR IMAGE**

Please email us a recent picture of yourself, ensure you put your name and date of birth in the message, send it to **voices@pancreaticcancer.org.uk**. Alternatively put a quality printed image of yourself in the post with this form.

**YOUR SIGNATURE**

Thank you for agreeing to be a Pancreatic Cancer Voice to help us raise awareness of pancreatic cancer. By signing this document you agree for the information you have given to be used in the ways you have indicated. Please sign your name below to confirm that all the information above is correct.

Signature:

Date:

**PLEASE SEND US YOUR COMPLETED FORM**

Thank you for your time, now please post your completed form to:

Pancreatic Cancer  
2nd Floor, Camelford House  
89 Albert Embankment  
London SE1 7TW

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