



ROYAL AIR FORCE CLUB
— FOUNDED 1918 —

Registered Charity 1108295

Please complete clearly in BLOCK CAPITALS and return to:

Toria.mcphaden891@mod.gov.uk

Care and Compassion Break Nomination Form

FOR OFFICE USE ONLY	
Membership No.	
Membership Category	
Date elected	
Entrance Fee	
Subscription	
Proof of Commission	
Notified	
Direct Debit	
Associate Member	

PART A DETAILS OF THE NOMINATOR

Surname _____

Forenames _____

Rank _____

RAF Club Membership No (if applicable) _____

Contact Number _____

Email Address _____

Explanation if not a Club Member _____

RAF Club Station Rep ☐ Station Welfare Officer ☐

Station Commander ☐ Other (Please specify below) ☐

PART B DETAILS OF THE NOMINEE

Surname _____

Forenames _____

Rank _____

RAF Club Membership No _____

Contact Number _____

Unit / Squadron _____

Email Address _____

Date of Current Appointment _____

Address (Including postal code) _____

PART C
SUPPORTING INFORMATION

To be completed by the nominator.

- Please give us a full description of circumstances of the application for the Care and Compassion Break
- If we require further information, we may need to contact the nominator
- Please (initial here) _____ to confirm that the nominee is content with their details to be shared in confidence with the RAF Club

PART D
DATES OF THE REQUESTED STAY

Date(s) of 1st preference for the stay _____

Date(s) of 2nd preference for the stay _____

Date(s) of 3rd preference for the stay _____

PART E
ADDITIONAL NOMINEE NAMES

Name of 2nd adult (if applicable) _____

Name of 1st child (if applicable) _____ Age _____

Name of 2nd child (if applicable) _____ Age _____

PART F

OTHER INFORMATION AND SPECIAL REQUESTS

Please let us know of any special requests which could include:

Accessible Room with Shower ☐

Step free access from the lift ☐

Hard of hearing / Deaf alarm ☐

Connecting room / family room / rooms close by ☐

Please note the request reason below

PART G

CONSENT

I agree that I will provide, to the best of my knowledge, the personal information required to identify the eligible person and the personal information of the other dependent members of the family or household to process this application for assistance.

We, the facilitating charity, will not use any information given for any other reason than in connection with this application and for providing support.

I agree to be nominated for a Care and Compassion Break and give my consent for my personal data (inclusive of sensitive data) to be released to the Royal Air Force Club.

NOMINATOR SIGNATURE

Full name	Signature	Date

NOMINEE SIGNATURE

Full name	Signature	Date

Please email the completed form to:

Air Commodore Toria McPhaden, Vice-Chair of the Board of Trustees (Serving)
Toria.mcphaden891@mod.gov.uk