## Expression of Interest in Social Farming Waterford Leader Partnership **PRINT** Name: **PRINT Address:** Postcode; County; Mobile; Phone; Email - please print; What particular aspect of Social 'Care' Farming are you interested in? (eg. Farming, from healthcare perspective etc.) Are you a Farmer - (Circle one) YES NO If you are a farmer, please describe your farming practice; Word of Mouth Web Search **News Article** How did you become aware of Social Farming? Other Agency Referral I hereby consent to the use and disclosure of data and information by the Social Farming Support Office & Waterford Leader Partnership in the promotion and development of Social Farming, any details will not be disclosed to any external parties. SIGNED;







## **ANY OTHER INFORMATION**

(Please return this form to Waterford Leader Partnership, Lismore Business Park, <u>Lismore, Co Waterford.</u> )				
_	Department of Agriculture, Food and the Marine	S O C I A L FARMING Support	Leitrim_	





