**North East Inclusive Dance Network - Exchange**

Please complete the form by Friday 29 November 2019 and return to [info@neidn.co.uk](mailto:info@neidn.co.uk)

|  |  |
| --- | --- |
| Name |  |
| Email |  |
| Telephone |  |
| Discipline/Expertise/Art form |  |
| What can you OFFER?  Or  What do you NEED?  e.g. mentor/mentoring  introduction to contacts, work experience etc |  |
| Timescale  When does your offer/need start and/or finish? |  |
| I consent to this information being shared with the NEIDN network. | Signed………………..……………… Date …………………… |

(*Completing this form does not guarantee that your request will met*.)

**Please let us know how you would like the information to be shared by ticking the relevant statement below:**

* I would like to share the information ONLY with the network
* I would like the information to be shared as part of an OPEN OFFER outside of the network