

All Saints Community Association

Membership Application 2013 - 2014

I wish to apply for membership of the Association and I agree to abide by the rules As laid down by the Association constitution.

<i>For office use only</i>	<i>Staff Sign</i>
C.A. Number:
Date: ____/____/20____

*Name: _____
 *Surname: _____
 *Address: _____

 *Post Code: _____
 *Telephone: _____
 *Date of Birth: _____
 *Age: _____
 *Male/Female: _____
 *Country of Birth _____
 *Country of Permanent Residence: _____

*Please circle ALL groups that you attend

<i>Inters</i>	<i>Small Saints</i>	<i>Craft Class</i>	<i>Digital Photography</i>
<i>Model Club</i>	<i>V.I.P.S.</i>	<i>Stacey's Dance</i>	<i>Family History Thurs</i>
<i>Valerie's Dance</i>	<i>Valerie's Parents</i>	<i>LineDance Thursday</i>	<i>Family History Wed</i>
<i>Ann's Dog's</i>	<i>Janet's Dog's</i>	<i>Karate</i>	<i>Gym</i>
<i>Discussion Group</i>	<i>Section 8 Game Club</i>	<i>Video Club</i>	<i>Humour</i>
<i>Pastel Class</i>	<i>Keep Fit Classes</i>	<i>Flabelos</i>	<i>LineDance Weds</i>
<i>Pilates</i>			

Please tick appropriate box(es)

*Age

<i>Under 4</i>	<i>Under 11</i>	<i>11 - 17</i>	<i>18 - 21</i>	<i>Over 21</i>	<i>50 -60</i>	<i>OAP</i>
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*Ethnic Group

<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>White British</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>White Irish</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>White Other</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Black or Black British- African</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Black or Black British- Caribbean</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Black or Black British- Other</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Chinese</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Arabic</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Prefer not to say</i></td></tr> </table>		<i>White British</i>		<i>White Irish</i>		<i>White Other</i>		<i>Black or Black British- African</i>		<i>Black or Black British- Caribbean</i>		<i>Black or Black British- Other</i>		<i>Chinese</i>		<i>Arabic</i>		<i>Prefer not to say</i>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Asian or Asian British- Indian</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Asian or Asian British- Pakistani</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Asian or Asian British- Bangladeshi</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Asian or Asian British- Other</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Mixed- White & Black African</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Mixed- White & Black Caribbean</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Mixed- White & Asian</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Mixed- Other</i></td></tr> <tr><td style="width: 20px; height: 20px; border: 1px solid black;"></td><td><i>Other</i> _____</td></tr> </table> <p style="text-align: right; margin-top: 5px;"><i>(Please State)</i></p>		<i>Asian or Asian British- Indian</i>		<i>Asian or Asian British- Pakistani</i>		<i>Asian or Asian British- Bangladeshi</i>		<i>Asian or Asian British- Other</i>		<i>Mixed- White & Black African</i>		<i>Mixed- White & Black Caribbean</i>		<i>Mixed- White & Asian</i>		<i>Mixed- Other</i>		<i>Other</i> _____
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Emergency Contact Details

Name of Contact: _____ Home Tel: _____
 Mobile: _____
 Address of Emergency Contact: _____

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Medical Information

Do you have any allergies/ illnesses/ disabilities/ specific dietary requirements?

If yes please list below:

Fee Paid* **MEMBERSHIP IS FREE

<i>Under 18</i>	<i>Adult</i>	<i>60 and over</i>	<i>Disabled</i>	<i>Family</i>
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**Only immediate family members who live in the same house can apply for a family membership.*

Data Protection Statement

The information you provide on this form will may be passed on to South Tyneside Council. At no time will your personal information be passed on to organisations for marketing or sales purposes. The information you provide will be shared with other organisations for the purpose of administration, statistical and research purposes. From time to time you may be contracted by South Tyneside Council to take part in surveys or consultation, which are aimed at enabling South Tyneside Council to monitor performance, improve quality and plan future provision.

Notes:

- Please note this fee is for general membership of this centre, sections may be required to pay in addition a section membership fee.
- One membership form per person will be required.
- Membership fees are NOT refundable.
- Memberships are renewable annually in April.
- Members are advised that the Community Association does not provide personal accident insurance cover for centre users; you may wish to make your own arrangements for each cover.

Other Information

By completing this form I give permission for photographs and materials produced within the centre/ project to be used by the South Tyneside Council, All Saints Community Association and Partners.

If you would prefer to opt out of this please tick here

**ALL SAINTS COMMUNITY ASSOCIATION RESERVE THE RIGHT
TO REQUEST TO SEE YOUR MEMBERSHIP CARD OR
IDENTIFICATION AT ANY TIME**