

Bringing community & voluntary groups together



## MEMBERSHIP APPLICATION

**\*IMPORTANT\* - PLEASE ENSURE INFORMATION PROVIDED IS IN BLOCK CAPITALS.  
INACCURATE OR ILLEGIBLE DATA MAY LEAD TO A DELAY IN YOUR MEMBERSHIP. If you have  
any questions about this form please telephone us on 01895 442 722**

### SECTION 1

Please complete this form in BLOCK CAPITALS and return to the  
Office Manager, Hillington Association of Voluntary Services, Key House, 106 High  
Street, Yiewsley, Middx, UB7 7BQ

**NAME OF YOUR ORGANISATION: (INCLUDING ANY ACRONYM)**


**1<sup>ST</sup> CONTACT NAME (who is available during office hours):**

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**TITLE:**

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**POSITION IN ORGANISATION:**

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**CONTACT ADDRESS:**


**POSTCODE:**

**TEL NO:**

**FAX NO:**

**E-mail:**

**Website:**

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**2<sup>nd</sup> CONTACT NAME:**

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**TITLE:**

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**POSITION IN ORGANISATION:**

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**CONTACT ADDRESS:**


**POSTCODE:**

**TEL NO:**

**FAX NO:**

**E-mail:**

**Website:**

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## MEMBERSHIP – APPLICATION FORM

### SECTION 1 continued

Please give some additional information about the activities you are currently carrying out in the London Borough of Hillingdon. This might be leaflets or programme details about your organisation which give dates and times of activities in Hillingdon.

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**Do you work in any of the following areas? Please tick all that applies**

Advice and Guidance	<input type="checkbox"/>
Animal rescue, clubs or societies	<input type="checkbox"/>
Art and Leisure	<input type="checkbox"/>
Black and Minority Ethnic Groups	<input type="checkbox"/>
Carers	<input type="checkbox"/>
Charity Shops	<input type="checkbox"/>
Children, young people or families	<input type="checkbox"/>
Community centres/associations	<input type="checkbox"/>
Community development, services or regeneration	<input type="checkbox"/>
Counselling	<input type="checkbox"/>
Crime and Safety	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Employment, training, education and lifelong learning	<input type="checkbox"/>
Faith or religious groups	<input type="checkbox"/>
Fundraising	<input type="checkbox"/>

Health and social care	<input type="checkbox"/>
Heritage or environment	<input type="checkbox"/>
Housing, homelessness or tenants and residents associations	<input type="checkbox"/>
Lesbian, gay, bisexual, transgender groups-	<input type="checkbox"/>
Men's groups	<input type="checkbox"/>
Older people	<input type="checkbox"/>
Political causes, organisations or parties	<input type="checkbox"/>
Services/ex services associations	<input type="checkbox"/>
Sport or physical activities	<input type="checkbox"/>
Transport	<input type="checkbox"/>
Uniformed youth organisations	<input type="checkbox"/>
Welfare support	<input type="checkbox"/>
Women's groups	<input type="checkbox"/>
Volunteering	<input type="checkbox"/>
	<input type="checkbox"/>

**SECTION 2**

**Information about your organisation.**

Is it a company limited by Guarantee? Yes/No

Company number:

How long has it been in existence?

Do you have paid staff? (If yes how many)

Annual turnover £

Is it a registered charity? Yes/ No

Charity number:

Do you need volunteers? Yes/ No

***Does your organisation work:***

Only in Hillingdon

In Hillingdon and other Boroughs?

Nationally

*Please state which:*

**If your organisation receives funding, please state the main sources:**

Hillingdon Council

Membership subscription

Hillingdon Primary Care Trust

Donations

Charitable Trusts

Fundraising

Other (please specify)

**If your organisation is NOT a registered charity please provide a copy of your:**

Governing Document (Constitution)

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**Note: no information provided on section 2 of this form will be shared with any other organisation unless it is in an anonymised form, or with your permission.**

**MEMBERSHIP – APPLICATION FORM**

	Yes	No
<b>Can we publish the information above on our website?</b> (Note – we will only publish information contained in section 1 (pages 1 and 2) other information will only be used to help HAVS understand your organisation.		
<b>Can we publish the information above in any paper copy of the HAVS database?</b> (Note – we will only publish information contained in section 1 (pages 1 and 2) other information will only be used to help HAVS understand your organisation.		
<b>Do you wish to be a voting member of HAVS?</b> (As a voting member of HAVS you are entitled to vote for Voluntary Sector Representatives on the HAVS Management Committee. The Management Committee elects the Trustees / Directors who are legally responsible for the organisation).		

**The information on page one of this form will be published with your permission. The information on this page will only be used to help HAVS understand the diversity and needs of the local voluntary sector and will not be published.**

Is there any service not provided by HAVS, that you think would be beneficial to your organisation?

*(Please detail)*

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**DECLARATION**

I/we confirm that ..... (name of the organisation) is a voluntary organisation / Community group currently working in the London Borough of Hillingdon. We wish to apply for membership of Hillingdon Association of Voluntary Services. We understand that in doing so we accept the following statement:

HAVS is committed to taking positive action to be inclusive of all sections of the community in every aspect of its work. It aims to prevent exclusion and challenge discrimination. In joining HAVS your organisation is accepting this principle

**Name:** ..... **Date:** .....

**Signature:** ..... **Position:** .....

**Please note:**

**This information you supply will be used for both membership purposes and to keep our mailing list up to date.**