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**Membership Form**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Name5_large.png?v=1417850633 | | | Name | | | |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Envelope_write_large.png?v=1417850513 | | | Address | | | |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Telephone-Green_large.png?v=1417857579 | | | Telephone Number  Mobile | | | |
| Email | | | Email Address | | | |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Birthday_large.png?v=1417857296 | | | Date of Birth | | | |
| Image result for ethnicity | | | Ethnicity | | | |
|  | | | Gender | | | |
| **What would you like to do with us? Please Circle** | | | | | | |
| Inclusion Hubs  Inclusion Hubs  **Inclusion Hub**  **Inclusion Hub** | | Drama | | Other (please state) | | |
|  | | | **Do You Have?** | | | |
| Physical Disabilities | |  |  |
| Learning Disabilities | |  |  |
| Mental Ill Health | |  |  |
| Autism | |  |  |
| Sensory impairment | |  |  |
| Other (please state) | |  | |
| **http://cdn.shopify.com/s/files/1/0606/1553/products/Indiana_Suit5_large.png?v=1417852804** | | | Sometimes we take photos or film our events and activities to promote Inclusion Gloucestershire including using them on our website and social media.  I agree to be photographed  I agree to be videoed  I agree my story can be used  I agree my name can be used  I agree that images and videos can be used on Inclusion Gloucestershire website and social media | | | Yes No  Yes No  Yes No  Yes No  Yes No |
| https://cdn.shopify.com/s/files/1/0606/1553/products/Identify_Needs_compact.png?v=1417856900 | | | Please give us any information about any access or support needs that you feel we should be aware of when working with you. This will help us plan your involvement with Inclusion Gloucestershire.  e.g. Do you have allergies? Diabetes? Epilepsy? Or access needs? Do you need to bring your support worker with you? | | | |
| **Emergency Contact Details** | | | | | | |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Name5_large.png?v=1417850633 | Name | | | | | |
|  | Relationship to You | | | | | |
|  | Home Telephone | | | | | |
|  | Work Telephone | | | | | |
|  | Mobile | | | | | |
|  | Email Address | | | | | |

We keep your information on our database for 2 years, if your details change or you no longer wish to be a member and want to be taken off the database, please let us know.

**Our promise to you**

We promise that:

* We will keep your information safe and secure
* We will never sell your data
* We will never share your data with any other organisation unless either you give specific permission for us to do so or we are required to by law.

**With your permission:**

* We would like to keep you up to date with things that are happening at Inclusion Gloucestershire and you invite to events that we think you may be interested in
* Give you the opportunity to have your say about issues that affect people with disabilities.

This is a social membership and it does not give voting rights at Inclusion Gloucestershire

Signed: ……………………………………………………………….

Date: ………………………………………………………………….