

Associate Membership Application Individual Membership

Name	
Address	
Phone Number	
Mobile Number	
Email address	
Date of Birth	

- I hereby apply for associate membership of Age UK Derby & Derbyshire.
- I have read and understood the Membership Statements.
- I understand that membership is at the discretion of AUKDD but is normally renewable on an annual basis. Members may resign and membership can be withdrawn at any time.
- I am happy to be contacted by:

 phone

 letter

 Email*

 text message

Please tick as appropriate.

*We try to focus our activity and expenditure on services for older people. Using electronic communication saves money.

Signed.....

Date.....

Office use only	Application Received on:	/ /	Monitoring Data recorded:	
	Application Assessed by:		Member details recorded:	
	Date accepted:	/ /	Membership Number:	/ /

In order that we may consider your application for associate membership please respond to the following:

<p>Are you currently employed by, or do you volunteer with Age UK Derby & Derbyshire?</p>	
<p>How did you learn about our membership scheme?</p>	
<p>Which of our services are you familiar with or have had experience of?</p>	
<p>What are your particular areas of interest with regard to older people?</p>	
<p>How do you feel your Membership may benefit Age UK Derby and Derbyshire?</p>	
<p>How do you feel Membership may benefit you or someone you know or care for?</p>	
<p>Please list any political affiliations you have and any other organisations, forums or groups you participate in.</p>	

Thank you for taking time to complete this information. It will help us to tailor our communications to your particular needs and interests.

Membership Statement

To be a member of Age UK Derby and Derbyshire (AUKDD) all members must be able to confirm the following **membership statements**:

- I am aged 18+
- I am interested in the work of Age UK Derby and Derbyshire
- I am able to comply fully with the terms of Associate Membership of Age UK Derby and Derbyshire
- I will support the aims and objectives of AUKDD.
- I will use my role as a Member to the benefit of AUKDD.
- I will be mindful of the limitations of my role as a member.
- I will demonstrate the values of dignity and respect at all times.
- I will contribute my skills, knowledge and personal experience to the benefit of AUKDD.
- I understand that Members do not make statements, decisions or agreements on behalf of AUKDD.
- I understand that members are not trustees and do not hold the rights or responsibilities of governance.
- I would have a clear DRB or enhanced check.

For Corporate or Group members

- I have agreement from an appropriate management structure to become a Member of AUKDD and to be the named individual for corporate or group membership
- I understand I cannot use my Membership of AUKDD, its brand or image to any commercial advantage, without the express permission of AUKDD.

Signed

Date

Name

Completed forms can be handed to the Membership & Engagement Worker or posted to:

Age UK Derby & Derbyshire, 29a Market Place, Heanor, Derbyshire, DE75 7EG

Thank you.