

REGISTRATION FORM

Please PRINT Clearly

Name of group/organisation _____

Contact Name _____

Address: _____

Postcode: _____

Telephone: _____ Mobile: _____

E-Mail : _____

Website: _____

Brief description of groups activities:

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Are you a **voluntary** group **community** group **faith** group **Please tick one**

Number of members or people your group represents _____

Do you have a Constitution? Yes No Are you a limited company? Yes No

Are you a registered charity? Yes No Do you have paid employees? Yes No

In which priority electoral ward/s does your group operate? (Please circle) Barnfield, Central, Church, Peel, Spring Hill

OR other electoral ward/s: _____

OR Accrington wide OR Hyndburn wide

Does your group represent people with a disability, infirmity or long-term illness?

<input type="checkbox"/> Hearing	<input type="checkbox"/> Sight
<input type="checkbox"/> Ability to move around	<input type="checkbox"/>

Does your group represent a particular section of the Community or Point of Diversity?

Age: Elderly (over 50) <input type="checkbox"/>	Age: Youth (8 – 19) <input type="checkbox"/>	Disabled <input type="checkbox"/>	Disabled Youth <input type="checkbox"/>
Refugees & Emerging Communities (Migrant workers) <input type="checkbox"/>			Race & Ethnicity <input type="checkbox"/>
Sexuality <input type="checkbox"/>	Gender <input type="checkbox"/>	Trans <input type="checkbox"/>	Female <input type="checkbox"/> Male <input type="checkbox"/> Faith <input type="checkbox"/>

Please tick which best describes the membership of your group

<input type="checkbox"/> White British	<input type="checkbox"/> White & Black Caribbean	<input type="checkbox"/> Indian	<input type="checkbox"/> Bangladeshi
<input type="checkbox"/> White Irish	<input type="checkbox"/> White & Black African	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Kashmiri
<input type="checkbox"/> Other white background	<input type="checkbox"/> White & Asian	<input type="checkbox"/> Other Asian background	
<input type="checkbox"/> Gypsy/Roma	<input type="checkbox"/> Other mixed background	<input type="checkbox"/> Caribbean	<input type="checkbox"/> African
<input type="checkbox"/> Irish Traveller	<input type="checkbox"/> Chinese	<input type="checkbox"/> Other ethnic group	<input type="checkbox"/> Other Black background

**By joining the Network you will automatically become an associate member of the Lancashire VCFS Consortium and the East Lancashire VCFS Hub.
If you do/do not wish to become an associate member of these organisations please indicate below.**

Lancs VCFS Consortium: YES / NO	EL VCFS Hub: YES / NO
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**The Network has a number of focus groups (community interest groups).
If you would like to send a representative to one of these FORUMS or receive information about them please indicate your interest below.**

<input type="checkbox"/> Over 50s Forum	<input type="checkbox"/> Inter Faith Forum
<input type="checkbox"/> Disabled Forum	<input type="checkbox"/> Priority Ward (Neighbourhood Community Voice)
<input type="checkbox"/> Voluntary Sector Forum	<input type="checkbox"/> Youth Forum (8-19)

Would you be interested in joining/forming a NEIGHBOURHOOD NETWORK for your ward or town where you could work with other organisations to resolve issues and concerns in your area?

YES / NO

If you DO NOT want your information to be given out to other organisations for marketing and consultation purposes please tick the box

Your Name: _____ **Signature:** _____

Please return your complete registration form to the address below: -

**Membership, Hyndburn Community Network,
Hyndburn Voluntary & Community Resource Centre,
(St James Old School),
Cannon Street,
Accrington
Lancashire BB5 2ER**