



# Hackney CVS

## Membership Subscription Form

### Are you a new member or renewing your subscription?

Please tick the box below

**New**

**Renewal**

(If renewal, you do not have to complete the whole form, just tick fees, sign the back of this form and return with fees).

### Annual fees structure:

*Please tick the appropriate box for amount enclosed*

Unfunded and annual income less than **£10,000** **£10**

Annual income over **£10,000** but less than **£29,000** **£15**

Annual income **£30,000** or over **£30**

Affiliated members (Local Authority, statutory bodies, etc.) **£50**

***Please make cheques to Hackney Council for Voluntary Service***

Organisation Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full post code \_\_\_\_\_

Contact name(s) \_\_\_\_\_

Tel \_\_\_\_\_

Fax \_\_\_\_\_

email address \_\_\_\_\_

Minicom \_\_\_\_\_

No of employees

No of volunteers

Language(s) spoken \_\_\_\_\_

Do you take volunteers ?  **Yes**

**No**

Visit by appointment only?



Wheelchair access?

**What we provide:-** *brief description of services*

.....

.....

.....

.....

**Who we serve**

<b>All</b>	<input type="checkbox"/>	<b>women and girls</b>	<input type="checkbox"/>
<b>men and boys</b>	<input type="checkbox"/>	<b>people with disability</b>	<input type="checkbox"/>
<b>older people</b>	<input type="checkbox"/>	<b>ethnic minority</b>	_____
<b>children</b>	<input type="checkbox"/>	(state which)	_____
<b>young people</b>	<input type="checkbox"/>	<b>Other (specify)</b>	_____

**Annual Income**

**Source of income**

<b>No more than</b>	<b>£5,000</b>	<input type="checkbox"/>	<b>Local Authority</b>	<b>£</b>	<input type="checkbox"/>
	<b>£10,000</b>	<input type="checkbox"/>	<b>LBGU</b>	<b>£</b>	<input type="checkbox"/>
	<b>£30,000</b>	<input type="checkbox"/>	<b>Lotteries</b>	<b>£</b>	<input type="checkbox"/>
	<b>£50,000</b>	<input type="checkbox"/>	<b>Health Authority</b>	<b>£</b>	<input type="checkbox"/>
	<b>£100,000</b>	<input type="checkbox"/>	<b>Trusts</b>	<b>£</b>	<input type="checkbox"/>
<b>More than</b>	<b>£100,000</b>	<input type="checkbox"/>	<b>Corporate</b>	<b>£</b>	<input type="checkbox"/>
			<b>European Funding</b>	<b>£</b>	<input type="checkbox"/>
			<b>Other</b>	<b>£</b>	<input type="checkbox"/>

As a member of **Hackney Council for Voluntary Service** we agree to abide by the aims and objectives and Equal Opportunities policies of **HCVS**.

**Name** ..... **Signature** .....

**Position** ..... **Date** .....

**Thank you for filling in this form.** This information will be kept on **Hackney CVS** database and may be used for statistical purposes.

Please return to Paul Conway, Administrator by fax 020 7275 8577 or [paul@hcv.org.uk](mailto:paul@hcv.org.uk)  
Hackney CVS, 84 Springfield House, 5 Tyssen Street London E8 2LY or call 020 7923 1962.