**Membership Application Form**

**Section I - Organisation Details**

1. Name of the organisation and acronym:.................................................................................
2. Organisation type:...................................................................................................................
3. Date of incorporation:
4. Address Line 1………………………………………………………………………………………..

Address Line 2………………………………………………………………………………………..

City……………………………………………………………………………………………………..

ZIP/Postal code……………………………………………………………………………………….

Country……………………………………………………………………………............................

1. Contact details and social media accounts

Telephone:.....................................................................................................

E-mail:...........................................................................................................

Website:.........................................................................................................

Facebook:......................................................................................................

Twitter:...........................................................................................................

Youtube:........................................................................................................

1. Is organisation registered at:

Charity Commission Yes/No Please provide number……….…

Company House Yes/No Please provide number…………

**Section II - Main point of contact**

1. CEO/Director first name and surname:.................................................................................

Telephone:...............................................................................................................................

Email:......................................................................................................................................

1. Chair of Trustees name and surname:
2. How many employees do you have in the organisation:

Full time…………………………………………………………..……………………………………

Part time…………………………………………………………….…………………………………

**Section III - Details of Work**

1. Organisation Aims………………………………………………………………………………
2. Organisation Objectives:..........................................................................................................
3. Age groups organisation is working with:................................................................................
4. Organisation Activities (please list them as related to specific age and target groups):

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………...

1. Main projects in last three years (please list them chronologically):

………………………………………………………………………………………………………….……………………………………………………………..………………………………………...……………………………………………………………………….……………………………………………………………………………………………………………………………………………….

1. Did the organisation publish an annual report for the last three financial years? *Please attach all three to your application email*
2. Please list main partners of the organisation:

……………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Please list main funders/sponsors of the organisations in the past 3 years:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………....……………………...

**Section IV - Joining Camden Community Centres’ Consortium**

1. List three priorities of your organisation as a C4 member candidate:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………...

1. If you partnered in the past, or are current partner on the projects with any C4 member organisation, please give examples:

……………………………………………………………………………………………………………………………………………………………………………………………………………………

1. How did you hear about Camden Community Centres’ Consortium:

………………………………………………………………………………………………..

………………………………………………………………………………………………..

\*Declaration:

Hereby, I confirm that I clearly understood all the questions provided in the membership application. I understand the procedures in relation to monthly membership fees.

Hereby, I confirm all the details provided are correct and up to date.

Hereby, I confirm I understand Camden Community Centres’ Consortium membership policy.

Hereby, I confirm I understand that if application for membership is approved the organisation is responsible to act in line Camden Community Centres’ Consortium policies and regulations.

Hereby, I confirm that I am aware of the procedures for canceling membership and fees related to the same.

First Name and Surname typed: …………………………………………………………………....

Signature:.................................................................................................................................

Date: DD/MM/YYYY…………………………………………………………………………………..

Stamp: