

Worcester Volunteer Centre

Membership Form 2011/2012

Name of Individual / Organisation:

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Address :.....

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Post Code:.....

Tel No:.....

E-Mail:.....

Main areas of work / clients:.....

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I/We apply for membership of Worcester Volunteer Centre

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I/We understand that information concerning our organisation will be held on a database and that this information may be passed onto a third party undertaking similar charitable activity. Details will not be passed to any commercial organisation. Please indicate if you are willing for your organisations details to be passed on to other similar bodies : YES NO

Signed :.....

Please print name :.....

For Office Purposes. : General / Associate Member

Database Entry: Full / Partial entry