

Registered Charity No 1054442

**Associate Membership Application**

|  |  |
| --- | --- |
| **Name:** |  |
| **Organisation/Agency:** |  |
| **Address:** |  |
| **Telephone Number:** | HomeMobile |
| **E-mail:** |  |
| **Please explain why you want to apply for membership of VOYC?** |  |
| **Do you have links with any Youth Groups? If yes please give details……** |  **Yes** / **No**  |

|  |  |
| --- | --- |
| **Signed:** | **Date:** |
| **Are you happy to receive information from VOYC electronically: YES / NO****(Please note that there is likely to be a small charge if you are not able to receive information electronically)** |

[**VOYC Privacy Policy**](http://voycdevon.org.uk/sites/default/files/users/Juliet/Privacy%20Policy.pdf)

## **VOYC Devon**

## **General Data Protection Regulation (GDPR) – May 2018**

VOYC Devon is a membership organisation and as such we need to hold the contact information of each Organisation’s nominated VOYC representative. This means that we can:

* send that person VOYC mailings including the E-bulletin,
* enable individuals connected with children / youth sector organisations to make contact with your organisation through VOYC Devon,
* tell you about the VOYC Devon Annual Meeting and Report,
* create links between our Twitter and Facebook accounts (if relevant).

Your consent will last until we receive notification from you that you are no longer the point of contact for your organisation. We can assure you that VOYC will not share your data in any way other than shown above and remember, you can unsubscribe at any time.

Therefore, if you are happy for us to contact you, please complete the form below and tick all the relevant boxes?

**Please let us have the following information to ensure that our records are up to date and to evidence that we have your consent for us to hold this information:**

1. Please make contact with me / my organisation as the VOYC Nominated Representative using the following, (please tick all appropriate boxes):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Email |  | Phone |  | Post |  |
| Facebook |  | Twitter |  |  |  |

|  |  |
| --- | --- |
| Name of Organisation |  |
| Name of the First Representative |  |
| Postal Address |  |
| Landline Phone Number |  |
| Mobile Phone Number |  |
| E-mail address  |  |
| Organisations Website Address |  |
| Organisations Twitter Account Name |  |
| Organisations Facebook Account |  |

|  |  |
| --- | --- |
| Signature: |  |
| Print Name: |  |
| Organisation: |  |
| Date: |  |

Please return this form to: VOYC (Devon), The 100 Club, Wear Barton Road, Countess Wear, Exeter, EX2 7EH

Or by e-mail to: juliet@voycdevon.org.uk

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| For official use onlySigned off by Manager: Date Executive Notified Date: |