Membership Form



ASNA (Supporter), Suite W-05, Windrush Innovation Centre, Howbery Park, Wallingford, OXON, OX10 8BA info@asna.info | www.asna.info

What are the benefits of becoming a member of ASNA?

- Discount prices to all ASNA organised events;
- Regular ASNA newsletters;
- Updates on ASNA programme and projects;
- An opportunity to support the work of the charity;
- Mutual support, education and invitations to social activities.

Please complete this form IN BLOCK LETTERS or by computer and send to ASNA (Membership), Suite W-05, Windrush Innovation Centre, Howbery Park, Wallingford, OXON, OX10 8BA or send by email to <u>info@asna.info</u>. Please let us know if you require this form in an alternative format.

1. Membership details	
FULL NAME	
FULL ADDRESS	
COUNTY	
POST CODE	
TELEPHONE (INC. AREA CODE)	
MOBILE NUMBER	
EMAIL ADDRESS	
DENOMINATION OR CHURCH NAME	

IF YOU FOUND US AT A CONFERENCE, PLEASE STATE WHICH ONE		
2. About Your Membership - A		
DO YOU OR ANYBODY IN YOUR FAMILY HAVE A SPECIAL NEED OR DISABILITY?	YES	PLEASE GIVE DETAILS
	NO	PLEASE SEE SECTION 4
ARE YOU THE PERSON WITH A DISABILITY?	YES	
	NO	PLEASE GO TO SECTION 3
WHAT IS YOUR DATE OF BIRTH?		
DISABILITY?		
3. About Your Membership - B	·	
ARE YOU THE CARER OF THE PERSON	YES	PLEASE GIVE DETAILS
WITH A DISABILITY?	NO	PLEASE GO TO SECTION 4
NAME OF PERSON WITH A DISABILITY		
THEIR RELATIONSHIP TO YOU (E.G. SON, MOTHER ETC)		
WHAT IS THEIR DATE OF BIRTH?		

WHAT IS THE NATURE OF THEIR DISABILITY?			
4. SECTION 4	· · · · · · · · · · · · · · · · · · ·		
ARE YOU A PROFESSIONAL WORKING IN SPECIAL NEEDS / DISABILITY AREA?	YES		PLEASE GIVE DETAILS
SPECIAL NEEDS / DISABILITY AREA:	NO		PLEASE GO TO SECTION 5
WHAT IS THE NATURE OF YOUR WORK? (PLEASE IDENTIFY AREA AND SKILLS)			
5. SECTION 5			
PLEASE TELL US YOUR REASON FOR WANTING TO JOINING ASNA			
PLEASE TICK OR CROSS A BOX TO TELL	YOUR CHU	RCH	
US HOW YOU FOUND US	A CONFERE	NCE	
	LEAFLET		
	WORD OF A	NOUTH	

		INTERNET	
		OTHER (PLEASE STATE)	
• MEMBERSHIP FEES - (LA	ST UPDATED SEPTEMBER 2009)		
MEMBERSHIP FEES ARE AS FOLLOWS;			
• £5.00 - INDIVIDUAL MEMBERSHIP OVER 16 YEARS			
• £O - FREE -	£O - FREE - CHILDREN 16 YEARS AND UNDER		
 PLEASE USE THE ADDRESS OR EMAIL ABOVE TO ENQUIRE ABOUT GROUP/CHURCH MEMBERSHIP. 			
I ENCLOSE MY MEMBE	RSHIP FEE OF	£	
I ENCLOSE AN OPTIONAL DONATION OF : £		£	
		Total Enclosed	£
Signed		Date	

GIFT AID. PLEASE TICK HERE IF YOU WOULD LIKE ASNA TO RECLAIM THE TAX YOU HAVE PAID ON ALL THE DONATIONS YOU HAVE MADE SINCE 6 APRIL 2000 AND	
ANY FUTURE DONATIONS YOU MAY MAKE. IN ORDER FOR ASNA TO RECLAIM THE TAX YOU HAVE PAID ON YOUR DONATION(S) YOU MUST HAVE PAID UK INCOME OR	
CAPITAL GAINS TAX EQUAL TO THE TAX THAT WILL BE RECLAIMED.	

FOR ADMINISTRATION ONLY		
MEMBERSHIP NO		
SUB PAID		
DONATION PAIDSTANDING ORDER		
GIFT AID		
ACK LETTER SENT		

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