

# HULL COMMUNITY AND VOLUNTARY SERVICES LTD

## Membership Application Form

**Important** - please read the Membership Application Guidance

1. Full Name of organisation or group applying for membership.

2. Full address of group or organisation.

This address will be used for all Hull CVS correspondence.

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website: \_\_\_\_\_

3. Name of person who is appointed to act as the representative at Hull CVS meetings and to whom all correspondence will be sent at the above address.

4. Brief description of your group/organisations aims and activities.

5. a) Which of the following best describes the status of your organisation?  
(Please tick one box only)

- An organisation without a constitution or set of written rules
- An organisation with a constitution or set of written rules
- A registered charity
- A registered company limited by guarantee
- Registered both as a charity and company limited by guarantee
- A registered social landlord/housing association
- A registered Friendly/Industrial and Provident Society
- Church/faith group
- Other (please state .....)

b) Please enclose a copy of your governing instrument (constitution, memorandum and articles of association) together with details of any charity, company or other registration.

Governing Documents enclosed

If you have no governing document (e.g. because you have not been in existence for very long) please explain the structure of your group or organisation and how decisions are made - continue on a separate sheet if necessary.

c) Please also enclose a copy of your most recent Annual Report and Accounts (where applicable).

Annual Report and Accounts enclosed

6. How many members does your organisation or group have?

Member numbers:

7. How many of your organisation's members live inside the boundaries of the City of Hull?

Member numbers:

8. If your organisation has no members, does it provide services to people living inside the boundaries of the City of Hull?

Yes

No

9. On what date did your group or organisation's Management Committee or other policy-making body decide to seek membership of Hull CVS?

Date:

### **Declaration**

I confirm that my organisation accepts the Hull CVS membership criteria (described in the Membership Application Guidance) and wishes to become a member.

Signed:

Print Name:

Position in organisation:

Date:

Please return this form (together with any accompanying governing documents) to: The Services Manager, Hull CVS, The Strand, 75 Beverley Road, Hull, HU3 1XL

### **Data Protection**

The information that you have provided will be used for the purpose for which you have provided it and any relevant procedures following from this. This data will be maintained in accordance with the Data Protection Act 1998 and will not be passed on or sold to any other organisation unless required by law or with your consent.

Continued overleaf

## HULL COMMUNITY AND VOLUNTARY SERVICES LTD

Registered Office:  
The Strand  
75 Beverley Road  
Hull  
HU3 1XL

Private Company Limited by Guarantee No. 1570120  
Registered Charity No 514311

Because of our company status, we have to ask all members to complete the guarantee below.

Name of organisation:

Signed:

Print Name:

Position in organisation:

Date:

Every Member of the Company undertakes to contribute to the assets of the Company, in the event of the same being wound up while he is a member, or within one year after he ceases to be a member, for payment of the debts and liabilities of the Company contracted before he ceases to be a member, and of the costs, charges and expenses of winding up, and for the adjustments of the rights of the contributories among themselves, such amount as may be required not exceeding one pound.

### **For Office Use Only**

Date application received:

Date of Executive Committee and Decision: