Promise and Hope – Member Registration Form

Application	Reference No	

Attach Photo Here



47, Findern Green Sneinton, Nottingham NG3 7BU <u>United Kingdom</u> Telephone:07846704670 or 07759671274

Email: info@promis	04670 or 07759671274 seandhope.com
Important: When o	completing this form please print the information and use a black pen
Full Name (Including Title)	
Preferred Name:	Date of Birth:
Address	
Post Code	
Mobile: Emergency	Telephone: Emergency Telephone:
Next of Kin (for em	
Title and Name:	
Address	
Post Code	
	Telephone:
(annually £12.00) and s	eby confirm that I will abide by the rules/regulations of Promise and Hope, pay my monthly subscription of £1.00 upport the work of the charity as a loyal member for the period of my membership. I also understand that I will forfeit ravene the rules/regulations as applicable to the charity at any given time. I understand that the membership fee is not
Signed	Date
Official use only	Danami.
Approved/Declined Signed:- (On behalf of the chalf	Reason:- Date:- arity)
Membership No:-	Entered on DB Yes / No Officer Initials:-

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Please use this page to list what skills you have and are willing to use on behalf of the organisation and if there is any particular role that you are interested in.		