

WOULDHAM & BURHAM COMMUNITY MINIBUS SCHEME

GROUP MEMBERSHIP APPLICATION FORM

(Please use BLOCK CAPITALS and answer ALL questions)

NAME OF ORGANISATION	
ADDRESS	
POST CODE:	
TELE NO:	MOBILE:
EMAIL:	
NAME & ADDRESS TO WHICH INVOICES SHOULD BE SENT (if different from above)	
TELE NO:	MOBILE:
EMAIL:	
NAME & TEL. No. OF PERSON WE CAN CONTACT IN AN EMERGENCY	
NAME:	TELE:

ORGANISATIONAL STATUS (Please answer every question)		
Is your group...	YES/NO	
Profit-making? (Please state Company No.)		
A community/voluntary group?		
A statutory body?		
A registered charity? (Please state Charity No.)		

OUR MINIBUS MAY ONLY BE USED BY GROUPS INVOLVED IN ONE OR MORE OF THE ACTIVITIES LISTED BELOW. (Tick those with which your group is concerned)	
Education/Religion	
Recreation/Social welfare	
Other activities of benefit to the community? (Please specify)	
Youth Clubs	

DECLARATION

Our organisation agrees to abide by the terms and conditions as set out in the W & B Community Minibus Hire Policy and we understand that any breach of these conditions may result in our group being expelled from membership

SIGNED:

NAME:(PRINT)

POSITION:

DATE:

FOR OFFICE USE ONLY	
GROUP NUMBER	
FEE RECEIVED	
START DATE:	