



## Directions Plus

### Membership application form

Please choose your membership type and tick **one** box only. There is no fee for any category of membership.

**Full Membership** is open to disabled people, carers and disability related organisations.

Full Members will be invited to attend the AGM and will be entitled to vote. Should the Company be wound up, they may be asked to contribute £1 to any debts.

Tick here if you wish to join as a Full Member

**Associate Membership** is open to individuals or organisations with specialist knowledge, experience, interest or skills relevant to our work.

Associate Members are welcome to attend the AGM, but cannot vote.

Tick here if you wish to join as an Associate Member

**Corresponding Membership** is open to anyone entitled to be a Full or Associate Member but who does not wish to attend the AGM.

Corresponding Members receive our Newsletter and any other communications but are not entitled to vote.

Tick here if you wish to join as a Corresponding Member

Please turn over

Please complete the form below for inclusion in our company register of members and mailing list and return it to:

Directions Plus, Freepost ANG 10543, Cambridge CB4 0BL

Name
Organisation (if applicable)
Address
Post code
Telephone
E-Mail

**Data Protection Act 1998.** To register you as a member we need to store the above personal information. We may do this in both paper and electronic formats. The law says we need your permission to do so. The information will be treated confidentially and all records kept securely.

I give my consent for Directions Plus to record this personal information and store it in paper or electronic format.

Signature .....

Date.....