

Membership transfer form

Please complete this membership transfer form in BLOCK CAPITALS, then return to membership@acevo.org.uk or ACEVO, 71 - 75 Shelton Street, London, WC2H 9JQ.

YOUR DETAILS

Title (e.g. Mr. Mrs. Ms. etc.)		Organisation name	
First name		Preferred postal address	
Surname			
Job title		Postcode	
Email		Is this your <input type="checkbox"/> Organisation address <input type="checkbox"/> Home address	
Additional email (optional)		Website	
Telephone	Mobile	PA name (if applicable)	
Twitter handle (if applicable)		PA email (if applicable)	
<input type="checkbox"/> Please tick to confirm we can promote it		Registered charity number (if applicable)	
<input type="checkbox"/> Please tick if you are seeking a mentor		<input type="checkbox"/> Please tick if you are willing to be a mentor	
What are your main reasons for joining ACEVO?			
<input type="checkbox"/> Events		<input type="checkbox"/> Advice and helplines	
<input type="checkbox"/> Networking		<input type="checkbox"/> Professional development	
		<input type="checkbox"/> Information	
		<input type="checkbox"/> Lobbying	
		<input type="checkbox"/> Other, please state:	
Where did you hear about ACEVO? (Please tick one box only)			
<input type="checkbox"/> Recommendation		<input type="checkbox"/> Newspaper/TV/Radio	
<input type="checkbox"/> Internet		<input type="checkbox"/> Sector Publication	
		<input type="checkbox"/> Event Mailing	
		<input type="checkbox"/> Other, please state:	
Please inform us of any dietary requirements you have:			
Access needs:			
<input type="checkbox"/> Step-free access		<input type="checkbox"/> Wheelchair accessible	
<input type="checkbox"/> Electronic notetaker/palantypist		<input type="checkbox"/> Hearing induction loop	
<input type="checkbox"/> Information in electronic format		<input type="checkbox"/> Information in Braille	
		<input type="checkbox"/> Blue badge parking	
		<input type="checkbox"/> Information in Easy Read	
		<input type="checkbox"/> Assistance	
		<input type="checkbox"/> British Sign Language interpreters	
		<input type="checkbox"/> Information in Large Print	
		<input type="checkbox"/> Personal assistant/support worker	
		<input type="checkbox"/> Other, please state:	

EQUALITY AND DIVERSITY

ACEVO is committed to ensuring that its services are accessible to everyone regardless of gender, age, ethnicity, disability, sexual orientation or religion. The information you give on this form will help us comply with our policy of ensuring equality in our services to you.

As this information is personal completion of this section of the membership application form is optional.

You do not have to complete this section but it will help us improve our services if you can complete as much as possible. All information ACEVO collects will be treated confidentially in accordance with the General Data Protection Regulation (GDPR).

Gender <input type="checkbox"/> Woman <input type="checkbox"/> Man <input type="checkbox"/> Non-Binary <input type="checkbox"/> Prefer not to say If you prefer to use your own term, please state:
Is your gender identity the same as the sex you were assigned at birth? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say
Age <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60-69 <input type="checkbox"/> 70+ <input type="checkbox"/> Prefer not to say
What is your ethnicity? Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box
White <input type="checkbox"/> English <input type="checkbox"/> Welsh <input type="checkbox"/> Scottish <input type="checkbox"/> Northern Irish <input type="checkbox"/> Irish <input type="checkbox"/> British <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Prefer not to say Any other white background, please state:
Mixed/multiple ethnic groups <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Prefer not to say Any other mixed background, please state:
Asian/Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Prefer not to say Any other Asian background, please state:
Black/African/Caribbean/Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Prefer not to say Any other Black/African/Caribbean background, please state:
Other ethnic group <input type="checkbox"/> Arab <input type="checkbox"/> Latin American <input type="checkbox"/> Prefer not to say Any other ethnic group, please state:

EQUALITY AND DIVERSITY CONTINUED

Are you a disabled person? Yes No Prefer not to say

If you are a disabled person please tell us which of the following impairment groups apply to you. You may tick more than one box.

- Visual impairment Physical impairment Deaf/British Sign Language user Hearing impairment
 Mental health/mental distress issues Learning difficulties Neurodiverse Long term health condition/hidden impairment
 Any other disabled person, please state:

What is your sexual orientation? Heterosexual Gay woman/lesbian Gay man Bisexual Prefer not to say

If you prefer to use your own term, please state:

What is your religion or belief? No religion or belief Buddhist Christian Hindu Jewish Muslim Sikh
 Prefer not to say Any other religion or belief, please state:

TERMS AND CONDITIONS

1. I apply to become a member of ACEVO in its form as a company limited by guarantee and agree to be bound by its articles of association which specify a maximum liability of £1 in the unlikely event of insolvency.
 2. I understand ACEVO memberships are for the individual. Membership may be taken with you to your next role or transferred to your successor, depending on who paid for the membership.
 3. I have read and agree to the code of conduct at acevo.org.uk/about/code-of-conduct
 4. I have read and agree to all terms and conditions at acevo.org.uk/about/terms-and-conditions
- I would like to 'opt-out' of receiving all emails from ACEVO.

Signature

Date